Everyday Urban Neighbourhood Participation in Advanced Age

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Abstract

Designing public polices and urban neighbourhoods that address ageing issues require a deep understanding of neighbourhood participation from the perspective of lived experience. The aim of this study was to understand the meaning of neighbourhood participation as experienced by adults over the age of 85 years. Interpretive phenomenological research method, informed by the writings of Hans-Georg Gadamer and Martin Heidegger, was used to study the phenomenon of everyday urban neighbourhood participation by adults in advanced age. There is much research and knowledge about the phenomenon written by people who are not yet in advanced age. This study was concerned with hearing what it is older adults had to say about everyday neighbourhood participation. Fifteen participants, nine women and six men, aged 86-96 years, were recruited from within the Auckland inner city boundary of the Waitemata District. All lived in their own home, participated in their neighbourhood, and were able to recall recent life situations. The participants were recruited via advertisements placed in community newspapers and on notice boards in places frequented by older adults, and through a third party associated with aged persons' organisations. Interviews were audiotaped, transcribed, and worked into discrete stories of everyday experiences of neighbourhood participation. The participant-validated stories formed the data and, in dwelling with the data, three themes emerged as findings from this study. These interpretive findings of the everyday experiences were of 'holding on to the everyday' as participating, the experiences of 'being neighbourly' with relationships at the heart of participation, and the difficulties of 'keeping-going' as concern for holding on to abilities for participating in advanced age. Reflecting on the findings, participating in the ordinary everyday life of neighbourhood in advanced age both conceals and reveals the phenomenon of neighbourhood participation. My thesis is that older adults aged over 85 gift a quality to urban living that is neighbourliness. Amidst the busyness of urban life, they are going about their everyday being neighbourly. Everyday neighbourhood participation *is* the spirt of neighbourliness.

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Attestation of Authorship

"I hereby declare that this submission is my own work and that, to the best of my knowledge and belief, it contains no material previously published or written by another person (except where explicitly defined in the acknowledgements), nor material which to a substantial extent has been submitted for the award of any other degree or diploma of a university or other institution of higher learning."

Signed:

Date: 30 October 2018

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Chapter One: Introduction

Introduction

In an effort to shape active ageing and take advantage of the potential that older adults represent for humanity, the World Health Organization (WHO) challenged worldwide communities to become more age-friendly. An age-friendly community encourages opportunities for participation by having its structures and services designed with older adults in mind (World Health Organization, 2007b, 2015b). The promise of age-friendly initiatives to support the health and participation of residents is attractive to policy makers for public health and city planning alike. A neighbourhood perceived as supportive for older adults has a number of built features like public transport and a well-maintained pedestrian infrastructure that encourage mobility and social participation (World Health Organization, 2015a). Having these, and other 'known' helpful structures, in place increases the likelihood older adults will be able to get around and participate in urban neighbourhood life.

Understanding the essence of neighbourhood participation in older age is an important topic because for neighbourhoods to support older adults' participation it takes more than having things in place such as accessible transport options and social clubs available. Research supports the importance of the residential environment, showing that the neighbourhood characteristics influence older adults' participation. Moreover, mobility limitations and smaller social networks increase their dependence on the neighbourhood. Thus, it is expected that neighbourhood characteristics affect older adults' ability to continue participating. Yet, little is known about older adults' experiences of everyday participation with neighbours and the neighbourhood when 'out and about' in the everydayness of life. Thus, the focus of this study is the everyday lived experiences of older adults' participation in the urban neighbourhood.

In this chapter, I will present how I became interested in the topic of older adults' participation in the neighbourhood, the demographic shift, and I give operational definitions of neighbourhood and participation used in this study. I then outline key New Zealand social policies in response to an ageing population, including the age-friendly cities and communities' policy. I conclude with a summary of the chapters of this thesis.

What Brought Me to the Study?

As a community-based gerontology nurse, my clinical experience has taught me that older people work hard to navigate the many challenges and obstacles of 'their' neighbourhood to perform everyday activities outside the home. On a more personal level, this 'knowing' was brought home to me when hearing of an everyday experience of a friend's 90 year old mother. Unable to complete the supermarket shopping and errands within the parking allocation time, she increasingly finds herself in difficulty exiting the carpark, causing her to be anxious about shopping. This ordinary experience has potential to affect her ability to 'age-in-place' into the future. On the other hand, my parents, aged 85 years, out of concern for a future of managing their home and accessing their increasing medical care needs, felt compelled to sell their property and move into a retirement village located in the nearest urban centre. They never successfully made the transition from a full and rich small town community life to the disconnectedness of urban residential life. While able to interact beyond the retirement complex, they experienced a disconnectedness from a wider, more diverse neighbourhood-community life. In effect, they became isolated from a wider community.

My current role is a nurse educator in the tertiary sector. In my teaching, I explore the application of community and public health concepts for older people's community-based living. I bring stories from past clinical experience as illustration of older people's experiences living at home and in the neighbourhood. Regardless of my intention to portray older adults as ordinarily resilient, and managing with everyday life matters in their home and neighbourhood, I recognise that nursing students have a negative view of dependence and frailty in older age. These students are not unusual in their assumptions. The literature supports a predominant ageist view of older adults amongst nurses (Baumbusch, Leblanc, Shaw, & Kjorven, 2016; Kalfoss, 2017; Liu, Norman, & While, 2013). Both undergraduate and postgraduate nursing students are clinically focused on 'assessing and treating' the functional decline as a deficit of the individual rather than a societal disabling of older people that leads to premature dependence. For example, inability to perform the weekly shopping may be the result of too great a walking distance to the nearest bus stop, uneven pavements, and too few benches for resting. Inability to drive or use public transport creates dependence on others that could be mitigated by improved urban planning for the needs of older people. It is thought that a general public reluctance

to address the disabling features of the urban environment contributes to a deficit model of dependence in older age, a model to which nurses commonly ascribe. In combination with a rapidly ageing population, concern for the national health care budget has led to alarmist rhetoric of a 'grey tsunami' caused by a 'catastrophic explosion' of older adults that stigmatises this sector of the population.

Demographics

The worldwide phenomenon of an ageing population projects the number of those aged 65 years and over that will double in the next 30 years (Statistics New Zealand, 2014), particularly in urban areas (Beard & Petitot, 2010). This trend is evident in Aoteoroa New Zealand, a country of approximately 4.7+ million people. This is primarily the result of the large cohort of postwar baby boomers as well as increased longevity. More New Zealanders are reaching older age; in part, this is the result of a gradual improvement in the health status of New Zealand's indigenous Māori population and an ageing Asian population who migrated to New Zealand over recent decades. Diversity is increasing with a rising proportion of adults 85 years and older who, in 2014, comprised 1.7% of the population. Projections estimate this figure increasing to 4.7-5.6% by 2040, and continuing to rising. There are also widening social inequalities between those who are advantaged by early home ownership compared with disadvantaged groups reliant on benefits, private tenancy arrangements, and those living with disability.

Urban structures, particularly in Auckland and Wellington, have also been changing. The spatial spread of low-density single-family housing has increased growth on the peripheries of the city. Recent infill housing and medium to high density housing is intensifying inner city areas around transport routes. This has caused an increase in the cost of housing which has benefited many older house-owners. There is a significant growth in retirement villages that offer accomodation, lifestyle and care. A quarter of older New Zealanders in 2013 were living in Auckland, the country's largest and fastest growing city. Auckland is expected to experience the effects of a rapidly ageing population in which the percentage of older adults 65 years and over will increase 150.53% by 2040. Over this same period, projections for those aged 85 years and over show a 303.61% growth (Statistics New Zealand, 2014).

The increasing numbers of older adults and an older aged Auckland population, a trend replicated in all New Zealand cities, compels thinking about the liveability of its cities for older New Zealanders. Population ageing, along with urbanisation, is a phenomenon of the developing economies of the world. These two dominant forces will do much to shape social life in the 21st century (D. Phillips, Siu, Yeh, & Cheng, 2005; Phillipson, 2010) and, to a large extent, influences response of policy makers and town planners to the human needs of older urban dwellers. Cities will have to change to enable older people to participate in urban life. Older-adult focused health and planning policies reflect a philosophical basis and organisational direction for national and local interventions for its older citizens. I will now outline relevant New Zealand health policies and their relationship to participation of older people and age-friendly communities.

Neighbourhoods and Participation

Older adults' participation in their neighbourhoods is key to healthy and active ageing. In neighbourhoods healthy ageing refers not just to biological ageing but the holistic perspective that includes an emphasis on autonomy, participation, and wellbeing (World Health Organization, 2002b). Empirical research supports the importance of participation (Haak, Fange, Horstmann, & Iwarsson, 2008 ; Menec et al., 2015; World Health Organization, 2015a) and the neighbourhood as an important place of ageing (Lehning & Greenfield, 2017; Ozanne, Biggs, & Kurowski, 2014; Plouffe & Kalache, 2010). In older age, the home and neighbourhood environments are major living spaces in which most daily activities take place (Haak et al., 2008 ; Iwarsson et al., 2007; J. Phillips, Walford, Hockey, Foreman, & Lewis, 2013). Research supports the importance of neighbourhood characteristics on the health and wellbeing of older adults (D. Phillips et al., 2005). The neighbourhood as a place of ageing is an important feature of participation in advanced older age and participation a key indicator of human health and well-being. Theoretical literature in relation to person-environment fit, suggests that as people age and their individual competence declines, their neighbourhoods may become more relevant to their health, wellbeing, and self-identity (Lawton, 1986). With advancing age, mobility limitations and smaller social networks increase older adults' dependence on the neighbourhood. More than simply a physical setting, the neighbourhood incorporates "multi-layered physical, social and symbolic aspects in a dynamic process" of

attachment to place (Wiles et al., 2017, p. 28). Participation of older adults is an objective of public health policy and services, yet there are few empirical studies focused on participation in advanced older age or on the relationships between participation and the neighbourhoods (Haak et al., 2008).

Participation, is believed essential for leading a satisfactory and independent life at home in older age (Haak et al., 2008). The neighbourhood is the place where most activities of everyday life are performed in older age; for example, grocery shopping, paying bills, arranging house maintenance; social activities that include learning and self-development; and civic participation through volunteerism and political action, particularly in age-related organisations (WHO, 2002b). Thus, neighbourhood characteristics are expected to affect older adults' ability to continue living independently (Peace, Holland, & Kellaher, 2011; Wiles, Leibing, Guberman, Reeve, & Allen, 2012) and participating in neighbourhood life. Everyday participation incorporates those repetitive activities performed as part of life regardless of whether or not they are performed on a daily basis. Although there is no consensus in literature regarding its definition and operationalisation, participation is a focus in health care, public policy and urban planning for older adults.

Defining Terms Used in this Thesis

Participation

Participation is a broad concept that is variably defined from an individual and societal level and a key determinant of active and healthy aging (Gewurtz et al., 2016). Since its publication in 2001 the ICF model (World Health Organization, 2002b) has provided a conceptual framework of participation that has been used widely in research on participation (e.g. Iwarsson, Horstmann, Carlsson, Oswald, & Wahl, 2009). The model considers participation and activities as a function of the person's capacity (ability for involvement) and performance (intrinsic qualities for involvement e.g. motivation). A criticism of the model is failure to consider the unique characteristics of participation distinct from those of activities, an ambiguity that has contributed to difficulties measuring and understanding participation as distinct from activities in practice (Badley, 2008).

Participation refers to the general things that people do in daily life that are carried out as part of work, leisure or social activities. These include a range of

physical tasks e.g. walking, driving and social roles e.g. volunteering. Participation is both physical and social involvement in the person's world. It may be a discrete activity encompassing a range of participatory experiences for the individual (Gewurtz et al., 2016). For example, volunteer work may provide opportunity to connect with others, contribute to community and society, develop and express identity and develop capabilities and potential. Conversely experiences such as connecting with others may occur through involvement in a variety of activities such as volunteer work or joining a club.

Participation in physical, social and societal activities constitutes three key dimensions of participation. Social participation, the most widely researched area of participation, focuses on a "person's involvement in activities and interactions that provide interactions with others in the community" as distinct from physical participation with a focus on functional ability to perform tasks that involve the person in physical and social activities (Levasseur, Richard, Gauvin, & Raymond, 2010, p. 2146). Societal and civic participation addresses involvement in opportunities for contributing to others and society, through formal involvement (e.g. paid work) and informal involvement (e.g. voluntary work, caring for family) (Chaudhury, Campo, Michael, & Mahmood, 2016; Hand & Howrey, 2017a).

Understanding that participation is influenced by the environment is underpinned by Lawton's person-environment model (Lawton & Nahemow, 1973) suggesting there are reciprocal relationships between environmental factors and participation (Jette, Keysor, Coster, Ni, & Haley, 2005; Khetani & Coster, 2007). Personal and environmental contexts shape opportunities for participation in ways that recognise there are physical and social forces at play. Personal dimensions include age, gender and culture; social forces include accessibility, stigma and public policy that operate as facilitators and/or barriers to participation (Badley, 2008; Gewurtz et al., 2016). While the environmental context might influence whether or not the individual will involve themselves in a physical or social activity, so too the individual has some control over the type and level of involvement (Badley, 2008). Thus, participation includes agency and how the person feels about involvement in activities affecting variation in the types of activities they choose to do and opportunities they seek (Rochette, Korner-Bitensky, & Levasseur, 2006).

To capture the multidimensional nature of participation, I will use the broad and nonspecific definition of participation as "the person's involvement in a life situation" (World Health Organization, 2002b, p. 10) in this study. Doing so keeps me open to the many dimensions of participation and to exploring the meaning of participation as it is experienced through everyday living in the neighbourhood in older age. Further, it is contextually relevant as it is the definition used in New Zealand health policies for older people.

Neighbourhood

Neighbourhoods are local communities of place. In this study I generally subscribe to the concept of neighbourhood as

> One based on resident perceptions. As such they are normally residential areas of distinctive identity, often distinguished by name, and bounded by recognisable barriers or transition areas, such as railway lines, main roads, parks and the age or character of buildings (often associated with social or land use differences). Neighbourhoods thus defined vary in size widely according to local circumstances (Barton, Grant, & Guise, 2010, p. 32).

The focus for this study of inner-city neighbourhoods is the urban area (with its range of commercial, services and cultural uses) as well as the 'home place' comprising "the individual streets, squares, blocks … that make up the patchwork of the neighbourhood" (Barton et al., 2010, p. 33). Neighbourhood boundaries are loosely defined, with different people having different views of the area they call their neighbourhood (A. Smith, 2009).

The neighbourhood is primarily a residential area and one that is supported by a wider community. Neighbourhoods are places for people to live with networks of interacting factors, uses, activities, relationships and lifestyles. They are supported by an infrastructure of buildings, systems and services (A. Smith, 2009). As a place of residence the neighbourhood has personal meaning to its residents that may not show consistency in how they perceive it. It may also be that a person considers they have more than one neighbourhood. They may regard one neighbourhood for certain issues and events and a different area as their neighbourhood for other purposes. Thus neighbourhoods will be essentially self-defining and so too who they consider

to be their neighbours. The physical and social space of the neighbourhood where one lives (for example, local parks, shops and backyards/gardens) is the public space that influences ways in which self-identity is created. (Peace, Holland, & Kellaher, 2005). As physically and subjectively bordered spaces neighbourhoods "are geographies of materiality as well as meaning, of people as well as places" (Gardner, 2011, p. 263).

But rich descriptions of what neighbourhood can mean, combining a variety of physical and social characteristics, is not a definition of what it *is*. The social character and quality of the neighbourhood makes it distinctive to its residents. People experience neighbourhoods in a variety of ways, many of which involve the presence of and interaction with other residents – "social proximity". Social networks and patterns of behaviour all shape and are shaped by the character of a neighbourhood. Jacobs (1961) argued that the neighbourhood unit fails to capture the emergent complexity of organic social life inherent within neighbourhoods. The complexities of neighbourhoods as geographic places and meaningful social spaces for living makes the neighbourhood an important unit of study, particularly for older adults for whom neighbourhoods take on greater importance.

Guided by the notion that each of us has a personalised sense of our neighbourhood I will use participants' self-defined neighbourhood as the operational definition for this study.

Policy Frameworks

Globally, as in New Zealand, a number of factors have converged to influence the development of age-related public policies. These include the impact of demographic change with a range of housing and community needs for older adults, the policy goal of 'ageing in place', and awareness of the impact of urban change on the lives of older people, for example social exclusion (K. Walsh, O'Shea, Scharf, & Shucksmith, 2014; K. Walsh, Scharf, & Keating, 2017). Participation in community and societal life is encouraged and supported through a number of policies developed to address distinct aspects of public life influenced by these changes. The focus of New Zealand public policy has moved from providing healthcare and social services to promoting healthy, active ageing and participation. While needing to provide long-

term care for an ageing population, government policy needs to transform living environments to support an ageing population (World Health Organization, 2015b).

Critics argue that shift in policy focus on healthy ageing and participation denies the realities of older adults who are more likely to experience low functioning and dependence. The diversity of health and functional status of older adults requires policy responses to focus along a continuum of ability rather than a tendency to focus on the non-functioning end (World Health Organization, 2015b). With advancing age, older adults are more likely to experience poorer health status, greater mobility restrictions, limited income, housing insecurity, and social isolation. Thus, older adults will continue to attract the greatest proportion of a government's spend on healthcare and social services. The greatest potential for containing exponential growth in healthcare costs is policy supportive of older adults' independence and continued participation in society (Ministry of Health, 2016a). The shift from older adults as frail and dependent, a burden on health and welfare systems, to contributing citizens requires policy support for changes to social structures and societal attitudes that advance older adults' value and worth. Understanding the economic and social benefits of older adults' contributions, the New Zealand government has active ageing, independence, and participation as key features of its public policies.

Key New Zealand Public Policies

The aims of New Zealand public policies are to improve opportunities for older people to "participate in the community in ways that they choose" (Ministry of Social Development, 2007, p. 8), and it appears that the majority prefer to grow old in their homes. Two policies most directly developed to provide legislative and policy direction for older New Zealanders are the *Positive Ageing Strategy* (Ministry of Social Development, 2001), its companion document, *Older New Zealanders: healthy, independent, connected and respected* (Ministry of Social Development, 2013) and the *Healthy Ageing Strategy* (Ministry of Health, 2016a). The *New Zealand Health Strategy* (Ministry of Health, 2016b) provides the overarching policy direction for age-related policies. These key strategies are further supported by a number of interrelated polices spanning the spectrum of health, financial security, independence, personal safety, and living environments. For example, retirement funding (New Zealand Superannuation), disability: *New Zealand Disability Strategy, 2016* (Ministry of Social Development, 2016a), and housing: *Public Housing Plan*

2018-2022 (Ministry of Social Development, 2018). These, and other policies, serve as a common platform from which central and local government agencies and communities can develop cross-sectoral strategies and initiatives supporting health, independence, and participation of older adults. The role of Minister of Seniors within central government is pivotal in advocating for the issues of older New Zealanders across government with a particular focus on ageing in the community, transport, and disability support.

Internationally, as in New Zealand, governments are faced with finding new ways of meeting the growing demand for and cost of health services associated with an ageing population (World Health Organization, 2015b). New Zealand's publicly funded healthcare continues to mainly provide for health and disability services 'closer to home' (Ministry of Health, 2016a), while continuing a long-standing commitment to the vision and principles of positive ageing: "healthy, independent, connected and respected" older New Zealanders (Ministry of Health, 2016a, p. 6). Affecting healthy ageing are those factors outside the health system that strongly influence health over the life course and make the older person more vulnerable to long-term conditions and or disability. Exposure to various health risks into older age, such as poor housing and lack of exercise, influence health, wellbeing, and independence of older adults leading to greater allocation of services to the aged population. Social exclusion in older age also has a bearing on participation and wellbeing and is the focus of social policies that encourage connection and societal respect for older adults. New Zealand health policies recognise the intersection of age with a range of inequalities such as socio-economic status, gender, and minority group status that shape the health chances of people throughout life, only to be exacerbated in older age.

The Second World Assembly on Aging (United Nations, 2002) produced a pivotal report on ageing. Alongside gerontology literature the report heralded an international shift from older adults as dependent and in need of protection to that of responsible and active citizens. Today the value of older adults' participation is prevalent in international and national ageing policy. The shift was attributable to a number of factors including increased life expectancy and fiscal concern for escalating health and welfare costs, all of which lead to dismantling many of the protective measures for older adults (Raymond & Grenier, 2013). Demographic and fiscal changes have strongly contributed to policy ideology promoting the notion that

rather than older adults being passive recipients of health care, they are contributors to social and economic development through their participation (World Health Organization, 2002a). The participatory agenda adopted by New Zealand social policies promotes healthy, active and positive ageing as an expectation of older New Zealanders. Two New Zealand ageing policies, the *Positive Ageing Strategy* and *Age-friendly Cities and Communities Strategy* are summarised next, illustrating the prominence of participation.

Social Policy

   Positive Ageing Strategy

The Positive Ageing Strategy articulates Government's aspiration that it be "something everyone should experience" (Ministry of Social Development, 2015, p. 4), while promoting attitudes which respect and value older adults, recognise and support their contribution, and encourage their participation (Ministry of Social Development, 2001, 2013). Development of health and social policies at the time of the Positive Ageing Strategy in 2001 was in response to an international warning of the financial impact of an ageing population. New Zealand policy response to these warnings reflected a shift away from welfare and dependency to wellbeing and self-reliance (Davey & Glasgow, 2006). The Positive Ageing Strategy provided an early foundational framework alongside its companion document Health of Older People Strategy (Ministry of Health, 2001) for understanding the issues of older adults across government and non-government age- related policies. A criticism of the Positive Ageing Strategy (2001) is its sole focus on 'aged' and although the policy introduction attests to the importance of a life-course approach, the policy fails to adopt such an approach or address inequities that may occur during the life-course (Dalziel, 2001). Regardless of its weaknesses, the Positive Ageing Strategy remains a dominant policy framework for age-related public policies in New Zealand today.

   In the context of the recent 2013 publication *Older New Zealanders –
Healthy, independent, connected and respected* (Ministry of Social Development, 2013), government reinforces its continued commitment to the Positive Ageing Strategy vision and principles while updating its action points. In response to current concerns for social isolation, the document highlights the importance of connecting older adults with their neighbourhoods and communities. Together with enduring issues of independent living, and respect for the knowledge and skills of older adults,

these have been re-imagined through action promoting urban planning for age-friendly neighbourhoods as a strategic approach toward accessibility, social connection, participation, and independence.

The Ministry of Social Development administers the Positive Ageing Strategy and monitors progress against outcome domains that span health, income, independence, self-fulfilment, personal safety, and living environments. Underpinning the Positive Ageing Strategy is a social development approach that emphasises a collective responsibility. Government's role is investing in initiatives that advance positive ageing and social inclusion and older adults' responsibility is actively participating in, and contributing to, their community (Ministry of Health, 2016a). Older adults have the knowledge, skills and experience to contribute, and the Ministerial reports indicate older adults want to be included and they want the rights, the benefits and responsibilities associated with that inclusion (Ministry of Social Development, 2016b). Efforts by the Ministry focus on physical and social environments that support inclusion and participation; for example, ageist attitudes, age-friendly urban planning with communities more accessible, more inclusive and safe transport options (Ministry of Social Development, 2013).

The benefits of positive ageing for older adults are obvious; however, critics (e.g. Davey & Glasgow, 2006) have challenged the positive discourse on ageing for its emphasis on productive ageing and for an overly optimistic view of older age. The emphasis on contribution of paid and unpaid work by older adults may work positively to improve social valuing of older adults but critics are quick to point out the distinct advantages for governments meeting their fiscal responsibilities for economic growth. The underpinning criticism is an emphasis on valuing older adults as a 'resource', rather than an intrinsic human valuing of ageing. Nevertheless, the Positive Ageing Strategy has provided a useful framework for raising awareness of the value and contribution of older adults to society.

Ageing in place

As in many Western countries, New Zealand has adopted a policy of 'ageing in place' premised on the personal and societal benefits of older adults ageing in their own home and community. Evidence supports the preference of the majority of older people to age-in-place (Black, Dobbs, & Young, 2015; Davey & Glasgow, 2006; Lui, Everingham, Warburton, Cuthill, & Bartlett, 2009) for increased wellbeing,

independence, social participation, and healthy ageing (Lui et al., 2009; Means, 2007; Sixsmith et al., 2014). Governments accept ageing-in-place as a fiscally prudent policy goal predicated on the cost benefits of providing homebased healthcare, and supportive neighbourhood living environments over costly residential care services (Lui et al., 2009; Wiles et al., 2012; World Health Organization, 2007b). Ageing-in-place is not simply a political issue, it is also an emotional and lived *experience* that is inherently about 'place' and 'belonging' – since the decision to 'stay put' in later life invokes 'places of ageing', from the local (e.g., home and neighbourhood) to the national (e.g., New Zealand or 'society'). Ageing in place has developed into a "powerful idealised counter-narrative…[to] indignity, loss of autonomy…of institutionalisation" (Thomas & Blanchard, 2009, p. 13). Western cultural values of independence, self-reliance and individual responsibility have supported the notion of ageing-in-place, yet, these values can lead to a life of loneliness, helplessness, and boredom. For many, there are social and psychological benefits to stay put and for others, more often those in advanced age, the negative experiences of isolation from neighbourhood and social networks undermine their ability for participation (Oswald, Jopp, Rott, & Wahl, 2011; Sixsmith et al., 2014; Thomas & Blanchard, 2009). The role of the neighbourhood environment for participation appears crucial to positive ageing-in-place (Oswald et al., 2011).

Rights-based approach

As a signatory to the United Nations, New Zealand policy makers are obliged to address human rights through their policies. Policy emphasis on participation of older adults highlights both a 'right' of older adults to participate as autonomous individuals in everyday life and a government obligation to address initiatives that promote their involvement in the development of policies. A social policy of older adults' participatory involvement in neighbourhood and civic life is central to citizenship (Buffel, McGarry, et al., 2014). Participatory development emerged out of the shortcomings of a 'top down' approach in which governments developed policy and strategies without input from those most likely to be affected. The ostensible aim of a participatory approach is to make people central to program development by encouraging their beneficial involvement in interventions that affect them and over which they previously had limited control or influence (Buffel, McGarry, et al., 2014; Geiringer & Palmer, 2007). A consultative approach with

older adults as the population group most affected by the various social and health policies has been adopted as part of the process of New Zealand policy development (Ministry of Health, 2016b; Ministry of Social Development, 2013). Politically placing older adults central to policy is to understand that they are an economically and socially marginalised population group whose increased involvement in the structures and institutions of society need to include new forms of social partnership. A participatory approach has an effect of creating and debating a shared sense of public good while 'hearing' from older adults themselves as to their issues of concern.

From a human rights perspective, the large numbers and proportions of older adults point to a large sector of the population that is potentially highly vulnerable to neglect, isolation and abuse; thus compelling public forms of protection (World Health Organization, 2015b). Policies and legislation that protect their dignity and the right to participate as autonomous citizens address issues of ageism and access to services and facilities in their neighbourhood and beyond (World Health Organization, 2015b). Older adults' neighbourhood participation is protected in New Zealand legislation as a right protected by antidiscrimination legislation, and as an economic right to an adequate standard of living through weekly retirement pension (superannuation), options for free and subsidised travel, and access to a variety of subsidised services and facilities (Ministry of Social Development, 2013).

Social investment approach: Healthy ageing

As a signatory to the WHO's *Global Strategy on Ageing and Health 2016-2020*, New Zealand has committed to action on healthy ageing. Healthy ageing as "the process of developing and maintaining the functional ability that enables wellbeing in older age" (World Health Organization, 2015b, p. 228) is not only about preventing ill health but relates to all older adults regardless of health status. A focus on wellbeing and life satisfaction aims to identify what supports older adults to 'age well' conceived variably in gerontology literature as successful ageing, healthy ageing, or productive ageing. Each implies a slightly different approach to the gains and potential of ageing measured either in terms of outcomes or as an adaptive process to ageing changes (Villar, 2012). Outcomes have their basis in the medical model where health is measured against medical or clinical criteria, while social models of adaptation understand ageing as a process of adapting to minimise losses

and maximise gains. Both potentially discriminate between more and successful ways of ageing (Villar, 2012), a criticism of a healthy ageing policy approach.

As part of a shift by government from a 'social welfare' to a 'social development' approach (Geiringer & Palmer, 2007), New Zealand's age-related policies address notions of positive ageing, active ageing, wellbeing and a social investment approach to healthy ageing. Among positive health strategies, active ageing framework recognises the factors that affect how individuals and populations age, and the right to equal opportunities and treatment in all aspects of life as people grow older, including participation in the political process and community life (World Health Organization, 2002a). Health, urban design, and social policies supporting active ageing can potentially result in fewer disabilities associated with chronic diseases, greater participation in community life, improved quality of life and reduced health care costs (Levasseur et al., 2017). The shift from a 'cost' to an investment approach is reflected in New Zealand government's investment in the public health sector with an eye on positive long-term financial impact for the social sector (Ministry of Health, 2016b). Investing in healthy ageing is presented as a move away from a deficit model of ageing based on disengagement and dependency, ageism and neglect toward positive attitudes of ageing and greater civil, neighbourhood and community participation (Ministry of Health, 2016a; Ministry of Social Development, 2001). Government health spending from a social development perspective is one that promotes personal responsibility, age-friendly environments, and intergenerational solidarity.

A public health approach takes a long-term investment perspective. Investment in health can mitigate health costs and improve quality of life but it is likely to require long-term investment by the health sector and intersectoral government agencies. For example, initiatives that target the Ministry goal of 'growing strong and inclusive communities' potentially reduce the associated health costs of social isolation and loneliness in older age (Ministry of Health, 2016a). Action on social determinants of health achieves better health equity but requires greater intersectoral collaboration since most of the social determinants of health lie outside the health sector (Baum, 2015). Addressing the social determinants of health, for example, creating healthy environments including neighbourhoods that enable older adults' participation, can benefit older adults as a population group (Office for Senior Citizens, 2014). Positive advances in providing affordable and accessible

transport options for older adults, are social strategies that compensate for loss of capacity (Office for Senior Citizens, 2014) and demonstrate wider intersectoral approaches to addressing the social determinants of health for all. Health equity in all policies, systems, and programmes ensures responsibility for strengthening government stewardship role in supporting a social determinant approach to health (Baum, 2015).

The New Zealand Health Strategy (Ministry of Health, 2016b) and Healthy Ageing Strategy (Ministry of Health, 2016a) acknowledge the importance of an investment approach to health, taking into account the long-term impact of current government spending on people's lives. The economic benefits of investing in public health are understood to improve health equity and benefit society and the economy through decreased costs of ill health and maintaining productive capacity. Maintaining functional capacity and independence into older age also affords society the economic, social, and intellectual benefits of their contribution. For example, attempts to quantify the financial contribution of older adults voluntary work suggests the dollar value is significant to communities and the nation (Geiringer & Palmer, 2007). There is increasingly clear evidence to support government investment in the physical, social, and environmental factors of healthy ageing. These have long-term benefits for the population as a whole and improve health, wellbeing, and quality of life in older age (e.g. De Donder, De Witte, Buffel, Dury, & Verte, 2012; Hammer, de Oliveira, & Demakakos, 2014; Levasseur et al., 2017; Van Cauwenberg, Van Holle, De Bourdeaudhuij, Van Dyck, & Deforche, 2016). Accordingly, New Zealand age related policies acknowledge the fiscal and social benefits of a shifting focus on social policy initiatives that remove social and structural barriers to older adults' participation supportive of healthy ageing.

Age-friendly cities and communities

Age-friendly policies and initiatives are increasingly promoted as a solution to healthy, active ageing (Buffel, McGarry, et al., 2014; Jeste et al., 2016). They have been shown to create opportunities for older adults' participation in the neighbourhood and wider community, and thus support ageing-in-place (Lehning, Smith, & Dunkle, 2015). The *Active Ageing Policy* (World Health Organization, 2002a) and *Age-friendly Cities Framework* (World Health Organization, 2007b) have set a policy and research agenda in which the built, social and service environments

are critical to facilitating older adults' participation. This theoretical position assumes that the neighbourhood environment supports or impedes opportunities for participation. The New Zealand Government has responded to the WHO challenge for worldwide communities to become more age-friendly by making age-friendly communities a key strategic goal of the New Zealand Healthy Ageing policy (Ministry of Health, 2016a). For over two decades the WHO's Healthy City Movement has promoted urban design features required to create health-enhancing cities (Rydin, 2012). The age-friendly communities evolved from this work and more specifically the WHO Global Age-Friendly Cities project. This project involved extensive consultation with older adults in 33 countries, and highlighted the need to maximise the health and wellbeing of the older population in urban environments. As a means of engaging cities to become more age-friendly, the WHO (2015a; 2007b) published its *Age-Friendly Communities Guidelines* proposing eight age-friendly domains; outdoors spaces and buildings; transportation; housing; social participation; respect and social inclusion; civic participation and employment; communication and information; and community and health services .

The WHO initiative (World Health Organization, 2007b) has gained recognition as a global movement and arguably helped frame the ageing and community policy agendas worldwide (Lui et al., 2009; Menec, Means, Keating, Parkhurst, & Eales, 2011) and in New Zealand. The community-based approach is consistent with an increasing shift toward communities taking greater responsibility for public services once provided by the welfare state (de Filippis, Fisher, & Shragge, 2010). Political agenda aside, it makes sense that communities are at the heart of age-friendly initiatives, given that the community is where people live, shop, participate in leisure activities, and access health-care services (Menec, 2017).

Age-friendliness presents both opportunities and challenges to policy makers as a useful policy discourse on ageing, specifically how to meet the service needs of older people (Lui et al., 2009), and for setting policy direction for active ageing and ageing in place (Buffel, Phillipson, & Scharf, 2012). The public health benefits of interventions that target environmental factors are significant and may have a "greater effect on individuals and population mobility and social participation than those targeting individual factors, including disability" (Levasseur, Généreux, et al., 2015). Age-friendly cities and communities promote a social investment approach that supports meaningful participation of older adults in civic and social life.

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Involving older adults in community life has social capital value that benefits older adults as individuals and the community at large. The social underpinnings of the WHO age-friendly communities' guidelines align well with the social investment approach of New Zealand age-related policies.

The WHO (2007) age-friendly guidelines are the first attempt to develop an international response to challenges posed by the converging trends of urbanisation and an ageing population. The WHO (2007b) report defined an age-friendly city as one that encourages active ageing by "optimizing opportunities for health, participation and security in order to enhance quality of life as people age" and has "policies, services, settings and structures support and enable people to age actively" (WHO, 2007b, p. 5). Active ageing, in turn, is defined in terms of health, participation, and security (WHO, 2002a). Since the WHO launched its Age-Friendly Cities and Communities project in 2007, there has been an increased international political and policy interest for making communities more age-friendly (Lehning & Greenfield, 2017), as strongly evidenced within New Zealand age-related social policy.

New Zealand age-related policies have adopted the notion of participation identified by the WHO age-friendly communities' guidelines (World Health Organization, 2007b, 2015b) as a set of expected behaviours that include participation in social, cultural, and political life of society. The rights and responsibilities of older adults as citizens is recognised within age-friendly and social policy wherein the voice and participation of senior citizens are positioned in terms of partnership and collaboration within public decision-making and policy. The participatory focus of public action reflects a shift from individuals to communities as a whole and from a predominant focus on health-care services, housing, and transportation to deliberately influencing social and physical environments to enable older adults' active participation (World Health Organization, 2007a). An important question in exploring the process of this shift is, to ask to what extent are older adults active participants in this social agenda?

Community age-friendliness has captured the imagination New Zealand health and public policy makers. A number of nation-wide age-friendly initiatives form the basis of New Zealand government policies; for example, mobility initiatives include Total Mobility Scheme for those unable to access regular transport services (subsidised taxis), free off peak public transport, and driver safety programmes.

Regionally there is some development of age-friendly communities beginning to happen in New Zealand and these are gaining pace. Conversely, there is limited evidence of success addressing a number of social issues for older adults; for example, social isolation and age discrimination in the workplace (Ministry of Social Development, 2015). Government commitment and leadership for age-friendly initiatives come from the Ministry of Social Development to promote the concept, provide guidance and build the knowledge base for an age-friendly New Zealand (Ministry of Health, 2016a). Age-friendly cities and communities' guidelines are a guide for cities and communities assessing, planning, and creating age-friendly environments. They are not intended to be prescriptive; rather, they are to be adapted to the particular context of a country's cities and communities. At the heart of age-friendliness is recognition of the importance of key community features and contexts of the community environment, the built environment, organisation of community life, transportation access to the community and participation in community life and social connectivity (Menec et al., 2011; Phillipson, 2014; K. Walsh, O'Shea, Scharf, & Murray, 2012). In essence, these numerous approaches have in common an emphasis on physical infrastructure and the quality of social relations that promote social participation (Leung et al., 2011; Scharlach & Lehning, 2013 Lui, 2009).

In conclusion, age-related policies and initiatives promote healthy, active ageing through involvement in a range of activities outside the home that includes caring for self and others, socialising, working and learning. Conflating the notions of participation and activities assumes they are synonymous in ways that fail to recognise the unique characteristics of each. How then can public policy-makers and urban planners design a neighbourhood to support older adults' participation? And how can neighbourhood participation be measured? This study seeks to understand the experiences of everyday neighbourhood participation as told by older adults. Exploring this topic matters because neighbourhood participation of older adults is key to addressing the challenges and opportunities for ageing in urban communities and neighbourhoods.

Research Question

The question of this hermeneutic phenomenological study asks 'what is the everyday experience of urban neighbourhood participation by adults 85 years and older?'

Overview of Chapters

This thesis is presented in eight chapters.

Chapter one: Introduction

The introduction outlined what brought me to the study, the ageing of New Zealand population, participation as a key goal of New Zealand public and social policy for older adults, and age-friendly communities as a strategy for supporting elder's participation. I have identified why this study matters and ended by operationally defining participation for this study.

Chapter two: Literature review

The literature review examines and presents a synthesis of existing empirical literature and knowledge on the neighbourhood understood to influence physical and social participation of older people.

Chapters three and four: Methodology and methods

The methodology for this research and philosophical underpinnings used to explore the research question are drawn from Heidegger and Gadamer as the design for this hermeneutic study. An overview of how these two philosophers have informed and guided the study is provided in chapter three. The method used for moving from the philosophical framework to the process for participant selection and data analysis is described in the conducting of this study in chapter four.

Chapters five, six, and seven: Findings

These three chapters present the study's findings. Three notions, one per chapter, are discussed and each notion captures an understanding of what everyday participation in the neighbourhood means for adults 85 years and older.

Chapter eight: Discussion

Implications for nursing practice, urban design and research are discussed. The limitations of the study are explained.

Summary

Social and health policy directions for older people support healthy ageing and continued participation over the life course. Health promotion and disease/disability

prevention approaches that support functional capacity for participation adopt a policy focus of ageing in place through creating neighbourhood environments that are age friendly. New Zealand Ministry of Health has committed to an age-friendly country in its health policies for older people. The WHO age friendly cities and communities' guidelines offers countries, such as New Zealand, a way of developing age-friendly policies and initiatives to support older peoples' inclusion and active participation in their community. However, there is variable commitment by New Zealand regional and local government agencies, making this a timely study contributing to the development of a New Zealand-centric approach to age-friendly communities. Within this thesis, I will explore neighbourhood participation for older adults that will contribute to national and wider gerontological knowledge. The next chapter will explore literature regarding what is known about older peoples' neighbourhood participation and the effectiveness of age-friendly initiatives for supporting their continued participation.

Chapter Two: Literature Review

Cities have the capability of providing something for everybody, only because, and only when, they are created by everybody (Jacobs, 1961, p. 238).

Introduction

In order to explore older adults' experiences of urban neighbourhood participation it is important that I consider the relationships between the neighbourhood environment and older adults' participation in their neighbourhood. As identified in chapter one, core policy directions and principles articulated by international gerontological literature and the New Zealand government strongly support participation in relation to ageing-in-place and active ageing policies. The neighbourhood is well established as an important place for ageing and an important factor in determining opportunities for participating in everyday life (Buffel et al., 2012; Buffel, Phillipson, & Scharf, 2013; Phillipson, 2010; Wahl & Oswald, 2010). Thus, I will explore empirical literature related to participation in older age and how the neighbourhood environment affects their participation.

I will explore participation from the perspective of the impact of age-friendly communities on opportunities for participation. I will be using the WHO (2002b) definition of 'participation' as "the involvement in a life situation" (p. 10). The breadth of this definition supports the aim of this study to explore participation as an everyday experience that includes the physical, social, psychological, and spiritual dimensions of life. The research literature uses community and neighbourhood interchangeably with the various definitions including a physical boundedness that makes it a location and as a place of meaning and significance. For the purposes of this study, the neighbourhood is the individually generated boundaries of living, described by Hirsch et al. (2014) as "activity spaces" (p. 308). That is to say, the neighbourhood is determined by the everyday places within which each participant lives life. It is the place they leave from and return to in the course of everyday living.

Firstly, I will present the search methods used to locate the literature. Following this, I will present the academic and empirical findings of age-friendly cities from the perspective of the international framework of Age-Friendly Cities and Communities (World Health Organization, 2007b).

Searching for the Literature

I searched literature for perspectives on older adults' neighbourhood participation and what features of the neighbourhood enable or disable their participation. To identify current knowledge of the associations of the neighbourhood environment on participation in the ageing population I asked the question "What is known about older adults' participation in urban neighbourhoods?"

Undertaking a literature review in a qualitative study has been the subject of debate in relation to when it should occur and the extensiveness of such a search (Fry, Scammell, & Barker, 2017; Smythe & Spence, 2012). The basis of the debate is concern for the researcher being 'contaminated' or limited in his/her research focus by the available literature and research; thus, emphasising the need for qualitative researchers to work inductively. Conversely, (Wertz et al., 2011) argued that it is impossible to have no information about the phenomenon and thus bias is inevitable. Concern for research to be original rests on knowledge presently available. The argument for completing a literature review prior to the study is to discover the gaps in knowledge that justify this study. Without knowledge of previous research, not only is there risk of replication but also risk of limiting the rigour and quality of the study to be undertaken (Morse, 2012). Following an analysis of the debate, I concluded that an exploratory review of the literature was necessary and that avoiding contamination impossible. Accordingly, I collated studies found via searches on scholarly databases that directed me towards literature of ecological and social gerontologic relevance.

The databases primarily used were PubMed, PschINFO, Scopus, Academic Search Complete (via Ebsco) and Google scholar. The search methods were intended to identify contemporary relevant research and scholarly literature for the years 2007-mid 2018. Older references were only used when providing historical context. The inclusion dates were selected because they were conducted after the adoption of the WHO (2007b) Age-Friendly Cities and Communities guidelines which established eight key domains that support older adults' participation in urban neighbourhoods. I used relevant terms and combinations of terms (aged OR older adult OR elderly) AND Participation OR engagement AND Neighbo(u)rhood terms (neighbo(u)rhood, communities), AND urban AND age-friendly.

In addition, I searched important authors' work, examined relevant journals, and retrieved papers and books cited in reference lists of relevant papers. A number

of literature reviews have been useful in locating primary literature. My search was part systematic and part organic in that decisions to include and exclude papers were subjective decisions made on relevance.

Decisions about the literature for review involved analysis for themes which 1) were prominent and appeared repeatedly, 2) appeared across a range of literature and countries, 3) were specific to neighbourhood or community environment barriers and facilitators of older adults participation. Emergent themes were discussed with, and confirmed by, my supervisors.

I will now present a synthesis of the academic and empirical literature relevant to the present study. The empirical findings from studies on the impacts of neighbourhood environment on older adults' participation will be reviewed after an outline of the changing milieu of urban neighbourhoods and relevant conceptual frameworks.

An ambiguity   Changing Milieu of Urban Neighbourhoods for Older Adults

There are several reasons why a focus on urban neighbourhoods is important for understanding the participation of older adults. First, urbanisation is a persistent theme that has led to increased rise in city size and demand on public amenities, land use control issues, and threats to human welfare (Kourtit, Nijkamp, & Reid, 2014). Urban growth trends reflect a movement of people from suburban and sometimes rural living that has intensified inner city population and led to greater diversity in the age and socio-economic makeup of urban neighbourhood residents (Lauf, Haase, & Kleinschmit, 2016). On the one hand, diversity enhances the 'liveability' of places conferring a number of advantages for residents of all ages in terms of access to services and facilities, lifestyle choices, and wide ranging cultural and social activities (A. Smith, 2009). On the other hand, it presents policy and planning challenges for addressing the diverse needs of young to older populations over the life-course with implications for urban infrastructure, green spaces, shopping, housing, and social cohesion (Bramley, Dempdey, Power, Brown, & Watkins, 2009; Schwarz, 2010). Urban environments are continually responding to changing priorities that shape how urban residents aspire to live with each other. However, all residents are not equally able to influence how a city takes shape, and the process of shaping urban society largely reflects the interests of young urban workers and families (Biggs & Carr, 2015). Arguably urban society and population ageing has

tended to be kept separate in research policy leading to older adults being left out of discussions on the effects of economic influences on neighbourhoods (Buffel & Phillipson, 2016; Ryan, Hutchison, & Gottdiener, 2018). The invisibility of older adults at these discussions is shown to limit urban initiatives that are more likely to affect them.

Cities are central to economic development and, with it, growth and change. The focus of urban change is on generating wealth, innovation, and cultural creativity to thrive. Urban regeneration of cities provides opportunities for services that create many advantages for older adults in the form of access to healthcare, the provision of leisure and cultural activities and associated services required for daily living (Phillipson, 2004, 2010). On the downside, population turnover, high living costs, and inappropriate housing contribute to social isolation and widening inequalities for older adults (Buffel, Handler, & Phillipson, 2018; Phillipson, 2007; Scharf, Phillipson, & Smith, 2005). The widening economic and social inequalities in cities driven by rapid industrialisation in some cases, and de-industrialisation in others, creates inequalities amongst the older population across a range of different types of neighbourhoods. Some urban neighbourhoods require considerable investment in infrastructure to make them accessible and useable by older adults (Buffel et al., 2018). Other neighbourhoods have a good base of supportive infrastructure in place to support older adults' participation. Development plans for improving urban infrastructure are contested funds with competing priorities that often ignore the needs of older residents. Older adults are not typically incorporated in the mainstream of thinking and planning around urban environments (Alley, Liebig, Pynoos, Banerjee, & Choi, 2007). Many of the developments favouring older adults' participation that were in place prior to the global economic crisis of 2008 (e.g., public libraries and footpath maintenance programs) are gradually eroding because of fiscal tightening (Buffel & Phillipson, 2016).

Urban regeneration and the dominance of developers to influence planning, policy and directions, favours high density and high-rise apartments. These developments often result in disruption to older adults' social networks contributing to social isolation and marginalisation (Buffel et al., 2018). Urban regeneration has changed once familiar city centres into unfamiliar places that make older adults vulnerable to personal insecurity, fear for personal safety, social exclusion and retail establishments that fail to appeal to the older population (Phillipson, 2014). The

sense of 'lost community' (Rémillard-Boilard, Buffel, & Phillipson, 2017) leaves older adults vulnerable to being marginalised and limits opportunities for participating on personal and societal levels. A further consequence of lost community is the effect on older adults' reduced involvement in decision-making processes, further contributing to their vulnerability. A key principle of the WHO age-friendly communities framework includes consultation with older adults to ensure their needs and voices are listened to, yet research suggests they are less likely to have a say in matters that affect neighbourhood development (Buffel & Phillipson, 2016; Burns, Lavoie, & Rose, 2012). Legislation drives city planners and developers to design buildings and public spaces that meet accessibility standards for people living with a disability. Being able to move in, about and out of public spaces is an important aspect of urban liveability for older adults' but not sufficient in itself to support their social inclusion and participation in community and neighbourhood life. WHO age-friendly cities and communities' framework and indicators (2015a; 2007b) recognise a need for older adults to be part of community planning and decisions and for their needs to be included in the process of creating a liveable city.

Conceptual Frameworks

Three conceptual frameworks underpin the neighbourhood environmental research studies I have reviewed and these are age-friendly communities, ecological theory, and place-integration theory.

Age-friendly community framework

As discussed in the previous chapter, to address the challenges of a global ageing population, the WHO promoted age-friendly communities as a way to encourage international cities and communities to develop initiatives that support active ageing and participation of older adults. In accordance with their aim for active participation of older adults, the WHO proposes that a number of key elements need to be in place to be age-friendly. These include policies, services, and structures to create physical and social environments that enable older adults to stay connected and involved in their neighbourhood and wider community. The age-friendly concept has a greater focus on older adults' relationship with the neighbourhood. Indeed there has been unprecedented research interest in this area since the release of the WHO's age-

friendly policy framework in 2007, when previously the predominant focus of the older person-environment relationship had been on the home.

Age-friendly action occurs at the level of neighbourhood environment to create opportunities for participation and remove barriers that disable participation. As previously mentioned these include aspects of the built environment (e.g., outdoor spaces and buildings, housing); service provision (e.g., transportation, health services) and social aspects (e.g., opportunities for social participation, civic participation, respect, social inclusion and communication/information) (WHO, 2007b). The WHO (2015b), in its *World report on ageing and health*, reiterated the role of age-friendly environments in promoting functional ability of older adults by creating enabling environments (e.g., affordable and accessible transport) and removing barriers to them (e.g., high crime rates). Simple and cost-effective changes can be enormously beneficial in determining whether older adults are mobile and whether or not it is easy for them to stay connected and active into advanced older age (WHO, 2007b; WHO, 2015a). Funding is often cited as a barrier to growing age-friendly programs, consequently slowing the growth of age-friendly city developments (Phillipson, 2018).

In an effort to shape active ageing and participation as a life course process, the WHO's challenge in 2007 for international communities to become age-friendly, has been taken up by 600 cities and communities across 38 countries. New Zealand became the latest affiliated member to join the WHO Global network for Age-Friendly Cities and Communities (May 2018), and Hamilton, New Zealand's first age-friendly city, to join the Network in June 2018 (World Health Organization, 2018). Network members act as catalysts for other cities and neighbourhoods to adopt an age-friendly approach, while providing guidance and support to cities and communities working toward age-friendliness (Buffel et al., 2018). Until recently, much of the literature supporting age-friendly policy development has relied on descriptions of what age-friendliness is and what age-friendly community initiatives (AFCIs) are (Lehning & Greenfield, 2017). Recent research from these network countries is contributing to a growing knowledge base explaining factors that assist or hinder cities becoming age-friendly (Buffel, 2018; Spina & Menec, 2015). While the WHO's program is not the first to support an age-friendly perspective (Lui et al., 2009; Scharlach & Lehning, 2013), or the first to insist on the need for policy support

(Phillipson, 2014), it does offer opportunity for researchers to study international initiatives and action (Moulaert & Garon, 2015).

The widening participation needs of diverse older adult populations are an issue for the age-friendliness of urban neighbourhoods. Policy and urban developments are increasingly marginalising older adults. A growing concern for the marginalisation of older adults within urban neighbourhoods has become an equity issue for public health and city planning ((Buffel & Phillipson, 2016). The WHO age-friendly neighbourhoods is based on the principle of equity and propose age-friendly initiatives be developed in collaboratively with older adults as a means to addressing the widening disparities (World Health Organization, 2015b). The social and physical domains of the neighbourhood are prescribed in the age-friendly framework but the inequalities that develop for older adults through urban developments are not addressed (Rémillard-Boilard et al., 2017). Inequalities related to a combination of globalisation and economic recession makes older adults more vulnerable to social exclusion (Buffel et al., 2018). The exclusion of older adults from community life has been linked to the type of neighbourhood in which the person lives. For example, living in a neighbourhood characterised by poverty and marked deprivation (Remillard-Boilard, 2018) and one that is undergoing significant change (Buffel & Phillipson, 2016) exacerbates the risk of exclusion.

The literature on age-friendly communities predominantly focuses on urban ageing, thus neglecting the diversity and the geographic and demographic disadvantage of rural communities (Keating, Eales, & Phillips, 2013; Novek & Menec, 2014; K. Walsh et al., 2014). In its original age-friendly guidelines, the WHO (2007) acknowledged a lack of attention to rural and remote communities. The subsequent WHO (World Health Organization, 2015a) indicators were developed with a focus on the urban context at local government level and this may have limited their application to the suburban and rural communities (Davey, 2017). A small number of studies, mainly in Canada, have examined age-friendly concepts in relation to building age-friendly rural communities that highlight some differences depending on degrees of rurality, size of the community, and proximity to an urban centre (Menec et al., 2015). Compared with urban settings, rural communities share the common concern for considering age-friendliness in a holistic way and measuring it in terms of a range of community features. For example, initiatives are

more likely to succeed where there is government driven support at central and local levels along with collaboration and partnership between government and non-government organisations (Menec, Novek, Veselyuk, & McArthur, 2014). A review of rural age-friendly studies found that there was considerable involvement of older adults in rural communities but these communities may also suffer a lack of community capacity; for example, to form committees as part of age-friendly infrastructure (Neville, Napier, Adams, Wham, & Jackson, 2016). Studies have identified many challenges associated with rural ageing where some rural communities are by-passed, being isolated and service-poor, lacking in infrastructure, and economically depressed (Keating et al., 2013). These same authors also identify rural advantages that may compensate for lack of public facilities and services and provide opportunities for ageing. Age-friendliness is a function of the distribution of environmental supports and policies for active ageing in place as well as their availability and accessibility irrespective of whether a community is rural or urban. Regardless of urban/rural similarities and differences, the focus of this literature review will be urban age-friendliness in accordance with this study's interest in urban neighbourhood participation.

Critics of age-friendly initiatives purport initiatives to date are failing to address the needs of marginalised groups of older adults, for example, those living in highly deprived neighbourhoods and migrants (Lehning & Greenfield, 2017). Although cities provide opportunities for older adults to build and maintain social connections, the pressures of urban living may also create inequalities, making them more vulnerable to social exclusion (Rémillard-Boilard et al., 2017). Studies in Belgium showed population turnover could create a sense of insecurity in some neighbourhoods and prevent older adults developing relationship with newcomers (Buffel, McGarry, et al., 2014). Research conducted in Montreal (Canada) highlighted the impact of changing neighbourhoods on reduced visibility of older adults, intensifying feelings of exclusion and leading to an absence of their voices in politics and decision-making (Burns et al., 2012). The concept of power and power differentials in the context of age-friendly neighbourhoods highlights that older adults are a potentially vulnerable population with special needs often not considered in policy, programs, or planning and decision processes (Menec, 2017).

The WHO (2007a; 2007b; 2015a) recognised the imperative of inclusion and participation of older adults as an equity issue and as a foundational principle for

age-friendly initiatives. A systematic review identified a characteristic of age-friendly communities is the active involvement of older adults in their communities in contrast to older adults as passive recipients of services and supports (Neville et al., 2016). The review further identified older people's perceptions of their own communities is vital to assessing the priorities and barriers to age-friendliness (Neville et al., 2016). However, the effectiveness of age-friendly initiatives will be determined by the degree to which older adults are empowered to participate in all stages of creating and implementing age-friendly neighbourhoods (Garon, Veil, Paris, & Rémillard-Boilard, 2016; Glicksman & Ring, 2017; Menec, 2017). Embedding age-friendly communities in policy at all government levels challenges social inequality and power differentials (Phillipson, 2018). The WHO (2007, 2015a) argued for older adults to be placed at the centre of urban development; however, a majority of policy makers have used collaboration as a "privileged form of participation" (Rémillard-Boilard et al., 2017, p. 153). The notion of empowerment can help focus attention on the power dynamics in age-friendly initiatives invoking engagement of older adults, not as a homogenous group, but as a diverse group. Thus, existing social divisions and divergent interests highlight the challenges to creating effective coalitions, both with diverse groups of older adults, and with the diverse and competing interests within organisational and political domains.

Involving older adults in the decision-making process improves the success of initiatives (Buffel, McGarry, et al., 2014; Garon, Paris, Beaulieu, Veil, & Laliberté, 2014). However, to date, there is limited research to suggest how cities might go about creating effective partnerships (Buffel, 2018). The participatory approach advocated by the WHO (2015; 2007b) emphasises empowering older adults in the process of assessing for and developing initiatives. For example, Manchester (United Kingdom [UK]) and Quebec (Canada) have involved older adults from the outset of their age-friendly initiative to become an age-friendly city (Buffel, McGarry, et al., 2014; Garon et al., 2014). Community initiatives characterised by inter-sectoral collaboration, particularly government, research and grassroots organisations, have greater success attracting funding and, therefore, greater likelihood of sustained activity (Garon et al., 2016; Glicksman, Clark, Kleban, Ring, & Hoffman, 2014). To date, a criticism of age-friendliness is the prioritising of the 'healthy' older adult voice in discussions to the exclusion of the needs of diverse groups of older adults (Buffel, 2015). Furthermore, concern for the

economic pressures on local funders threatens existing services for older adults. A response posited by Phillipson (2018) is to build coalitions between and within cities and communities aimed at protecting services already in place for older adults.

Internationally, age-friendly frameworks have succeeded when central government has provided support (Menec et al., 2014). Central government hubs to connect people, ideas, and resources can help provide the necessary expertise required for planning age-friendly communities (Jeste et al., 2016). In studies focused on implementing age-friendly initiatives, sustained leadership and support from all levels of government was perceived crucial to success (Menec et al., 2014; Spina & Menec, 2015). Lack of capable leadership with an absence of direction was a barrier to establishing partnerships and getting projects off the ground; whereas strong leadership helped sustain momentum and secure necessary funding for initiatives (Menec et al., 2014)). The role of regional government is vital to encouraging communities to implement age-friendly initiatives particularly when they work collaboratively with the community (Menec et al., 2014; Neville et al., 2016; Spina & Menec, 2015) .

A crucial dimension of the WHO (2007; 2007b) age-friendly communities' framework is the need for establishing multi-sectoral and multi-level stakeholder engagement (Buffel et al., 2012; R. Smith, Lehning, & Dunkle, 2013). Governance processes can differ between communities, particularly with respect to the extent of older adults' participation in defining the problems and being involved in decision-making about actions (Greenfield, Oberlink, Scharlach, Neal, & Stafford, 2015; Menec et al., 2011; Moulaert & Garon, 2015). Some communities use a top down approach (government authority led) while others a bottom up (community led) approach to assessing, planning and prioritising community initiatives, and others use a combination. Listening to the community, supports a bottom-up approach and is considered vital to implementing age-friendly initiatives (Moulaert & Garon, 2015). Ensuring community representation and diversity has the additional benefit of raising community awareness of issues, for example issues of older adults and people with disabilities. Leadership and governance in collaboration and partnership with the community is important for the sustainability of age-friendly initiatives.

A limited number of case studies show what works in the process of a city being age-friendly (e.g. Buffel, McGarry, et al., 2014; Garon et al., 2014; Goldman, Owusu, Smith, Martens, & Lynch, 2016; Menec et al., 2014). When older adults

define the problems and prioritise for older adults, the outcomes are then validated and deemed relevant. For example, New York City was the first to join the WHO Global Network of Age-Friendly Cities and Communities. Since its initial city-wide assessment of ageing-related issues in 2008 it has introduced a number of age-friendly initiatives. In consultation with an older adult advisory group, the city has responded to expressed need for improved transport options and improved elder friendly services including age-friendly bus shelters, benches, colleges, and universities offering a number of neighbourhood-level ageing improvement districts. The New York City initiative is an example of how to make a significant impact by consulting with older adults and incorporating their concerns into ongoing planning processes (Beard & Montawi, 2015; Goldman et al., 2016).

Making communities age-friendly involves developing or modifying social and physical environments so that older adults can meet age-related needs through participation in neighbourhood life. Age-friendly neighbourhoods are characterised by physical and social environments that promote social inclusion and mobility. Arguably, the WHO age-friendly guidelines (2007a) and core indicators (2015) have focused attention on the effects of neighbourhood environment on participation and independence. Independence and self-reliance are insufficient if not accompanied by opportunities to maintain social relationships and participate in meaningful social roles (Thomas & Blanchard, 2009).

Evaluating the success of age-friendly community initiatives has tended to use surveys to measure the level of community involvement through attendance at programs and by the policies in place that focus on older adults (Buffel et al., 2018). The WHO (2015a) age-friendly core indicators provide a guide for assessment and monitoring the progress of community initiatives. An additional benefit of monitoring is the data gleaned from audits that can be used to measure progress and enable comparisons across programs that contribute to knowledge exchange.

The age-friendly community framework is underpinned by two key theories; ecological and place-integration theories. First, I will outline the ecological theory in relation to neighbourhood participation of older adults.

Ecological theory

The idea that developing more age-friendly environments enables older adults' to participate in their neighbourhoods emerged from the ecological model of ageing

(Lawton & Nahemow, 1973). The model proposes that outcomes in later life result from the interaction between the 'competence' of older individuals and the 'press' of their environment. The demands or 'press' of the environment and levels of individual competencies that change as part of the ageing process require older adults to adapt or modify their behaviours. As urban development typically favours the young and working elite (Alley et al., 2007); the environment 'presses' upon the capabilities of the older population, potentially making it difficult for them to participate in neighbourhood life. As a theoretical approach, the WHO guidelines are congruent with ecological models, which address the interaction between individual functioning, (referred to as "competence" in the model) and the press of the surrounding environment (Lawton & Nahemow, 1973). To be active and participating, older adults require the social and physical supports within the environment to sustain their capacity to adapt to ageing changes in order to remain independent (Stones & Gullifer, 2016).

An increased interest in participation has shifted the focus from individual capacity to multiple environmental influences that can affect mobility and social participation (Desrosiers et al., 2009). The ecological theory of ageing refers to the match between the older adult and his/her environment that makes it possible to keep doing necessary and desired activities with comfort (Lawton & Nahemow, 1973). According to the docility hypothesis (Lawton, 1986), individuals with lower competence are more sensitive to the demands of the environment than those with higher competence. Thus in very old age the relationship between the neighbourhood and participation is significant due to increased vulnerability to environmental challenges associated with living in advanced age (Iwarsson et al., 2009); for instance, an older adult who has no mobility impairments may take the opportunity to walk some distances to use services to be more physically active. In contrast, the absence of transportation options would be detrimental to the older adult with mobility limitations. Guided by the environmental docility hypothesis a large body of ageing in place research and programs have examined the Person-Environment fit between community-dwelling older adults who live in their own home (Haak, Ivanoff, Fange, Sixsmith, & Iwarsson, 2007; Iwarsson et al., 2007) and in a supportive neighbourhood (Lehning, Smith, & Dunkle, 2014; Yang & Sanford, 2012). The findings support the environmental press of the home and neighbourhood can impact health and wellbeing.

The interaction between older adults and their environment describes how older adults adapt themselves or their environment to achieve everyday competence.. Scholarly arguments view the various sources of 'environmental press' (transportation, walkability, and housing) and "social press' (associated with the behaviour and underlying ageist attitudes of community members) to be modifiable features for participation (Moulaert & Garon, 2016). The literature demonstrates the importance of the environment in influencing behaviour and thus a determinant for participation (e.g. Engel et al., 2016; Levasseur, Généreux, et al., 2015; Moran et al., 2014; Van Cauwenberg et al., 2012). The focus on the environment as a moderator of participation appears to fit well with the age-friendly communities approach. Conceptually the age-friendly framework has shifted the traditional focus from individual capacity to the current focus on multiple environmental influences that can affect participation of population groups. Creating maximal "fit" between older adults and the outdoor environment improves the likelihood of older adults being able to access their neighbourhood without assistance, affirming their independence (Novek & Menec, 2014). For example, access to transportation makes it possible to get to services and to volunteer, showing the connections between capacity for independence and the neighbourhood environment.

Person-environment interaction suggests that objective barriers in the built environment (operationalised as accessibility) do not always relate to perceived usability (Lien, Steggell, & Iwarsson, 2015). Environmental press is both an objective and perceived barrier to their environments and is important in understanding the relationship of environment to participation. Barriers in the built environment may be professionally assessed either objectively through observation or by using self-rating to capture older adults' perceptions of such barriers (Portegijs, Rantakokko, Viljanen, Rantanen, & Iwarsson, 2017). Objective measures of barriers alone provide limited information of neighbourhood mobility for example, because what impedes a person with lower functional capacity will not be a barrier to someone with greater functional mobility (Iwarsson et al., 2009). Perception of environmental barriers considers personal and environmental factors as well as the desired activities of an individual (Lawton, 1986; Rantakokko et al., 2010). Although perception as a measure of environmental accessibility provides greater understanding of barriers and enablers to neighbourhood participation, it does require that study participants are moving about the neighbourhood. For example, those with

functional limitations may not be exposed to physical environmental barriers due to restricted activity and so be unaware of access problems. Alternatively, according to selective optimisation and compensation (Baltes & Baltes, 1990), older adults may mitigate functional losses by adapting and compensating in response to environmental challenges or barriers. Where accessibility problems prevail, the perception of usability shows a range of adaptive environmental behaviours are adopted by older adults to compensate for functional limitations and maintain activity in the neighbourhood (Lien et al., 2015). Thus, the ecological perspective of person-environment fit has a functionalist view of ageing with an emphasis on adaptive response to environments expressed in social and psychological terms.

The fit between the older adult (person) and the environment is critical for determining social connectivity. Social-ecological models were proposed more than a decade ago for use in public health planning and evaluating effective health-promotion programs. This paradigm proposed the need to go beyond traditional individual-level approaches and consider multifaceted and multilevel environmental influences on population physical activity levels and social participation (Baum, 2015). The importance of this multilevel approach is simultaneous consideration of the influences of individual factors and contextual factors (i.e., neighbourhood social and physical environments) on participation. For instance, an older person who has no physical limitations and lives within walking distance to services may walk and take the opportunity for physical activity and informal social interaction along the way. However, for those with limited mobility and no public transport within walking distance there are limited opportunities for casual social interaction in normal everyday life. From an ecological perspective social connectivity can be promoted by making a community more age-friendly (e.g. increasing transport options); thus, can be viewed as an outcome of an age-friendly neighbourhood (Menec, 2017).

When an older adult experiences declining competence or changes in the environment exceeding their adaptive behaviour they develop a range of strategic responses all of which impact on self-identity (Peace et al., 2011). With passing time, the capacity for living a preferred life changes with the changing body, changing social connections, changing psychological strength, and shifting identities of the self. The place one chooses to age in – normally one's home and neighbourhood – was, once a family and social hub. As social structures of family and neighbourhood

change over time, that home and neighbourhood may take on new meanings of solitary familiarity and comfort, evoking memories that reconfirm meaning and purpose (Peace et al., 2011). So too, the effects of ageing may require physical, social and emotional effort, challenging the older adult to confront loss, limitation and life's transformation. How well older adults transition these changes depends upon personal protective or adaptive qualities, for example resilience, and social supports available (van Abbema et al., 2015).

Place-integration theory

The second theory to underpin the research literature and the age-friendly framework is that of place-integration. 'Place' as location, has acquired a particular meaning as a context for human action that is rich in human significance and meaning. Neighbourhoods as physical places with significance and meaning to older adults evoke a sense of attachment. The concept of place is used to explain dimensions of the complex human relationship with meaningful environments. Through a process of integrating into physical places the person is moved by the qualities or attributes of places to consider that place their 'home'. The processes are dynamic and active and more complex than the presence of community features or individual attributes. Similarly 'place' of aging is constantly changing through the actions and interactions of people, their past experiences, and their desired futures (J. Smith & Cartlidge, 2011). Place integration refers to the creation of new meaning and values for individuals through individual ability to integrate and reintegrate in a meaningful way (Spina & Menec, 2015).

Experiences of and in places are essential to understanding how individuals create self-identity and sustain self-actualization in older age (Rowles & Bernard, 2013). The identities of ageing are produced through interactions and relations with others. Interaction, social isolation and interactions between generational groups influence individuals' and groups' sense of themselves as older adults (Hopkins & Pain, 2007). The ways in which age is lived out and encountered are likely to vary according the meaning of particular activities in particular places. Observations suggest that difference between groups can lead to self-segregation in the use of particular spaces. Older adults have different access to and experiences of places than younger adults and certain spaces are associated with older adults in ways that can make spaces divisive as well as inclusive (Holland, Clark, Katz, & Peace, 2007).

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Furthermore, people actively create and resist particular age identities in the way they use places and avoid others (Hopkins & Pain, 2007). Accordingly, a sense of self becomes associated with place and becomes evident as a commitment to living with the challenges of life. In response to geographical gerontology it has become commonplace to refer to ageing as embodied, emplaced, and relational (e.g., Hopkins & Pain, 2007; Ziegler, 2012). The social and experiential dimensions of place and ageing has drawn on theories of place and ageing (Rowles, 1993), spatiality and age identity(Peace et al., 2005, 2011), wellbeing, independence, and mobility (Schwanen & Ziegler, 2011) and unfamiliar environments (J. Phillips, Walford, & Hockey, 2011), all of which address the influence that familiar and unfamiliar places have on ageing. In my study, I am interested in the relationship between the meanings of participation and urban neighbourhoods as physical and social places for older adults.

A growing body of research on the effects of neighbourhood effects indicates place matters to the participation of older adults (Lehning & Greenfield, 2017; Ozanne et al., 2014; Plouffe & Kalache, 2010). Not only does the physical environment support or constrain participation in the neighbourhood, so too the experience of the neighbourhood as a meaningful place has a significant bearing on participation (Scharf & Keating, 2012; Wiles et al., 2009). Place integration provides a way to see how a person, through his or her actions, is integrated into particular environments in a constantly changing and relational set of processes. I suggest that understanding the meaning that older adults place on participation in their neighbourhood, is critical to understanding their perceptions of their neighbourhood's age-friendliness.

Taking this conceptualisation of place, the neighbourhood is a significant location of everyday life that shapes social relationships and identity in older age (Phillipson, 2007; Ziegler, 2012). The social construction of aged identities and the contribution of place and landscapes to older adults' health and wellbeing are bound to place. Concepts of home and community have consistently been linked with the notion of a sense of place as "spatially located patterns of behaviour which is made up from flows and movements and intersecting social relations across space and over time" (Ziegler, 2012, p. 1296). Theories about place attachment and identity emphasise the transformation of 'space' into 'place' over the life-course (Rowles & Bernard, 2013) describing how people form bonds to the environment, thus affecting

their experiences of participation. Attachment to place is a sense of positive bonding between individuals and their neighbourhoods and wider communities that involves feelings of pride, safety, familiarity, belonging and satisfaction with place (De Donder et al., 2012; Wiles et al., 2012). They learn to align or 'fit' their changing physical and cognitive abilities with their home and neighbourhood. Those who have lived a long time in their area appear very emotionally attached to their neighbourhood, in spite of the changes to neighbourhood and deficiencies in the available infrastructure (Dobner, Musterd, & Droogleever, 2016). Place attachment appears to be the basis of older adult's preference to age in their home and a key driver in the promotion of ageing in place or 'staying put' (Wiles et al., 2012). When a place loses the importance of personal meaning, attachment and spatial uniqueness, place attachment built up over a life course (Rowles, 1978; A. Smith, 2009) is replaced with a sense of placelessness (Relph, 1976). Pressures on urban planning for efficiency undermine the significance of place creating "anonymous spaces and exchange environments" (Freestone & Liu, 2016, p. 143) that give a sense of sameness to public spaces. The point here is this has concerns for how change can contribute to social exclusion in older age as well as social inclusion. A 'rooted' sense of place comes from opportunities for developing social relationships within the neighbourhood that can mitigate social isolation. Creating meaningful places for ageing involves social and cultural issues that go beyond issues of physical place (Fang et al., 2016). As older adults experience the effects of ageing, inclusive neighbourhoods may become more important in older age in ways that involves more than altering the built environment. The social experiences arising from the rhythm of daily interactions with neighbourhood creates a social 'insideness' where people feel they know each other well and develop social networks and feel as they belong in place (Relph, 1976). On the other hand, 'outsidedness' can lead to exclusion, loneliness and isolation from social and neighbourhood life (Fang et al., 2016).

The notions of social inclusion/exclusion are inherent to place-integration theory. Social exclusion is linked to an absence of belonging in urban life (Buffel et al., 2012) and rural life (K. Walsh et al., 2014) that results from a failure of one or more domains through which resources and status are allocated within society. The domains of private market systems, state systems, voluntary systems that encompass collective action affect opportunities for inclusion along with family and friend networks (K. Walsh et al., 2014). Accordingly participation and integration refers not

only to older adults' involvement in community life, but is also associated with their social capital, including civic participation, and the nature of social networks where there are reciprocal relationships (Scharf et al., 2005). Neighbourhood social capital is generally associated with interpersonal interactions – social networks, attitudes of trust, shared norms, reciprocity, a sense of belonging and caring about people who live in the same neighbourhood (Sampson & Graif, 2009). Social interaction or social connectedness is a persistent theme in age-friendly literature. An age-friendly neighbourhood supports both social connection and contribution. Arguably, a neighbourhood that fosters mutually beneficial relationships among neighbours is one that recognises the social capital of these relationships and, in turn, fosters contribution of its neighbours (Scharlach & Lehning, 2013). The WHO age-friendly model recognises that social participation and social support are strongly associated with participation, enabling older adults to demonstrate competence, respect and esteem from their community (World Health Organization, 2007b, 2015a). Opportunities for contribution and involvement in local voluntary activities has a reciprocal benefit to the older adult in terms of purpose and satisfaction and to the neighbourhood who benefit from the older adult's knowledge and skills (Emlet & Moceri, 2012). Intergenerational programs are a growing feature within age-friendly literature promoting opportunities for including and integrating older adults into neighbourhood life. Older adults who perceive their neighbourhood as a meaningful place have higher levels of participation and integration in the neighbourhood (Scharlach & Lehning, 2013).

A sense of belonging that comes from established social relationships and connectedness is a popular focus within public policy and population health. For example, the New Zealand Ageing Policy Strategy articulates 'connectedness' in association with independence, social participation and active involvement in everyday life (Ministry of Health, 2016a). Social participation through spontaneous and informal connections build community bonding and enable the older adult to remain socially engaged and develop a depth of neighbourhood engagement (Buys et al., 2015) and is believed key to social capital (Aird & Buys, 2015; Menec et al., 2011). A sense of connectedness allows people to still feel 'human among humans' and creates a feeling of belonging (Carpiano & Hystad, 2011). In addition, studies have shown that socially engaging with others allows older adults to keep connected with their social networks and involved in the life of the community (Gardner, 2011;

Stephens, Breheny, & Mansvelt, 2015). Older adults with a diverse social network are likely to access resources more easily than people who are socially isolated. For example, a person with a diverse social network is more likely to have access to someone who could drive them to activity programs, thus maintain social involvement in the neighbourhood (Menec, 2017). Moreover, those who feel secure in their neighbourhood are more likely to engage in social activities that provide social support, opportunities for education, learning, and volunteering in community activities (Scharlach & Lehning, 2013) and to live independently (Murata, Kondo, Tamakoshi, Yatsuya, & Toyoshima, 2006). The argument that the older resident not only benefits from a well-functioning neighbourhood but contributes to its social capital comes from a perspective of attachment and identity built up over time spent living in the neighbourhood. Participation in formal and informal activities is a way for older adults to maintain or establish relationships, feel respect and esteem, and exercise competence (World Health Organization, 2007b).

Key Empirical Findings

I will now review the effects of the urban neighbourhood environment on participation identified within the empirical literature. In searching the literature to better understand what it is about neighbourhoods that best supports older adults' participation, three key environmental aspects became apparent; walkability (infrastructure to support mobility), sociability (social relationships for connecting and contributing), and governance. Taking age-friendly principles into consideration and those of ecological theory, the neighbourhood can facilitate (or not) greater participation and health of older adults (Levasseur et al., 2017). A rapidly growing body of research has focused on how the environment affects older adults getting about and participating in social activities, indicators of active ageing and age-friendliness of the neighbourhood. The dynamic interaction between older adults' participation in the neighbourhood relies on key design elements that might impede or support capacity for remaining mobile and socially involved. I will present a synthesis of the accumulated body of evidence that suggests multiple aspects of the built and social environments affecting older adults' capacity for participation. These will be presented under the following key themes: getting about (walkability); getting together (sociability); the combination of getting about and connecting; contributing; and finally, governance.

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Getting about

Being able to get about the neighbourhood is key to participation (Chaudhury et al., 2016; Levasseur, Généreux, et al., 2015; Stahl, Carlsson, Hovbrandt, & Iwarsson, 2008; Van Cauwenberg et al., 2011). Much of the built environment research has focused on walking because of its importance to health and as a means of interacting with the neighbourhood for everyday living and social interaction. Currently there is enough empirical evidence to corroborate that the way neighbourhoods are designed influences whether and how often older adults participate in walking and overall levels of mobility (Rosso, Auchincloss, & Michael, 2011; Villanueva et al., 2014). There is also a growing body of empirical evidence to support perception that the quality and accessibility of the built environment is important for getting about (T. Grant, Edwards, Sveistrup, Andrew, & Egan, 2010). The evidence is not clear and nor is it consistent but it does support an association between mobility and the built neighbourhood environment (Chaudhury et al., 2016).

Neighbourhood environments have the potential to determine whether or not older adults will get about the neighbourhood (Marquet & Miralles-Guasch, 2015a). Many studies have found that older adults report walking as the most usual form of neighbourhood physical activity, whether it is the main mode of transport or as a form of leisure (i.e., for social reasons or with the dog). Many studies have identified an association between neighbourhood environmental characteristics and older adults' walking activities. Within the neighbourhood literature there are a variety of approaches used to measure environmental features and walking activity, each with its own strengths and weaknesses. For example, many studies use quantitative measures such as survey items and scales to measure older adults' perceptions of neighbourhood conditions, such as the physical condition of the neighbourhood, to determine associations with walking activity. Other studies obtain objective descriptions of the neighbourhood using tools for measuring specified dimensions for example, the presence of litter, people loitering, in combination with interviews with older adults who give their perceptions of safety to move about the neighbourhood. A range of observational methods are also incorporated into a number of neighbourhood effects on older adults' perceptions of walking destinations and purpose for walking in the neighbourhood.

From a public health perspective, walking represents a specific and measureable behaviour useful in measures for health. The health benefits of walking,

the most common form of physical activity in older age, improve physical health and provide a range of psychological and social benefits. For example, walking improves mental health and reduces the risk of anxiety and depression (Julien, Gauvin, Richard, Kestens, & Payette, 2013; Marquet & Miralles-Guasch, 2015a; Van Cauwenberg et al., 2011) as well as social isolation (Hand et al., 2014). The physical benefits of walking may reduce, delay, or prevent the negative effects of chronic health conditions including heart disease and diabetes (Chaudhury et al., 2016; Marquet & Miralles-Guasch, 2015b). Older adults unable to get about their neighbourhood because of a physical disability or environmental limitations have a lower quality of life than those without these constraints (White et al., 2010). Chronic conditions in later life are individual risk factors for restrictions in mobility and physical activity levels (Hinrichs et al., 2015). Frequent short walks such as those involved in everyday life activities (e.g., shopping, banking, and bus stop) is likely have greater health benefits in terms of total minutes/week spent walking than participating in recreational or planned physical activities (Chaudhury et al., 2016).

The walking distance required to access amenities and services is especially relevant for older adults whose daily activities occur mostly in the immediate neighbourhood (1-3 blocks of home) (Chaudhury et al., 2016; Levasseur, Généreux, et al., 2015; Rosenberg, Huang, Simonovich, & Belza, 2013; Van Cauwenberg et al., 2011). Living within walking distance to services is consistently supported by research findings as important for meeting daily needs, including shopping for food, public transport, bank and social clubs (Cerin et al., 2016; Moran et al., 2017; Van Cauwenberg et al., 2012). Studies of the temporo-spatial nature of mobility vary in measures of walkability. In a Spanish study a walkable neighbourhood was measured in a walking time of 10 minutes for all ages (Marquet & Miralles-Guasch, 2015b) and an English study identified distance of 400 metres (G. Smith, Gidlow, Davey, & Foster, 2010) to amenities and services, a distance endorsed by the WHO (2015a) in its age-friendly indicators. A Scandinavian randomised control trial found adults (n=632; 75-81 years) perceived 0.5 kilometres a distance that facilitates walking and 2 kilometres a barrier to mobility (Rantakokko, Iwarsson, Manty, Leinonen, & Rantanene, 2012). Distances of 200-1600 metres around participants' homes are most often used to represent the size of the 'neighbourhood' because these typically represent 'walkable' distances to local destinations (Hooper, Foster, Nathan, &

Giles-Corti 2012). Destinations in walkable distance contributes to participation (Giles-Corti et al., 2013).

Functional decline associated with ageing, for instance, loss of vision, hearing, or mobility makes older adults more vulnerable to the neighbourhood's built features (Gell, Rosenberg, Carlson, Kerr, & Belza, 2015). Mobility limitations and associated fear of moving about the neighbourhood might increase difficulty overcoming barriers to physical activity, for example greater distances and poorly maintained sidewalks (Chaudhury et al., 2016; Chaudhury, Mahmood, Michael, Campo, & Hay, 2012; Rantakokko et al., 2009). Research findings suggest that age-related functionality highlights the importance of building neighbourhood structures and services for supporting independent functioning in the face of declining abilities. Accessibility to services and amenities affects all older adults' participation in the neighbourhood and particularly those with physical limitations. Features perceived by older adults to increase the likelihood of getting about the neighbourhood include the presence of neighbourhood toilets (Risser, Haindl, & Ståhl, 2010), rest areas with seating, and disability parking (Chaudhury et al., 2012; Moran et al., 2017; Ottoni, Sims-Gould, Winters, Heijnen, & McKay, 2016; Rosenberg et al., 2013).

The importance of pedestrian infrastructure was identified in two systematic reviews of older adults' perception of environmental attributes of neighbourhood walking (Moran et al., 2014; Van Cauwenberg et al., 2011). Pedestrian infrastructure potentially enhances independence and mobility in older adults particularly for those at greatest risk of falling. Although the review of quantitative studies found the significance of sidewalks features and walking was inconclusive (Van Cauwenberg et al., 2011), the review of qualitative studies identified a number of features likely to influence walking (Moran et al., 2014). These features broadly related to pedestrian infrastructure (the condition of the sidewalks), high curbs and lack of space on the sidewalks (Li & Zhang, 2015; Moran et al., 2014; Moran et al., 2017). Older people's perception of walking safety is influenced by a well-maintained pedestrian infrastructure (Chaudhury et al., 2016; De Donder, Buffel, Dury, De Witte, & VertÉ, 2013; Rosenberg et al., 2013). Not surprisingly a poor pedestrian infrastructure, poorly maintained sidewalks and litter in the streets were perceived as barriers to walking and associated with less time and frequency spent walking in the neighbourhood (Brookfield & Tilley, 2016; Hovbrandt, Fridlund, & Carlsson, 2007; Nyman, Ballinger, Phillips, & Newton, 2013). Conversely aesthetically pleasing

streetscapes, such as greenery and interesting things to look at, facilitated walking (Moran et al., 2017). A number of cross-sectional studies identified numerous obstacles: reduced space (e.g., parked cars, rubbish bins and overgrown greenery blocking the sidewalk) and poor sidewalk etiquette by other pedestrians and non-motorised vehicles sharing the sidewalk that caused older adults to fear for their safety (T. Grant et al., 2010; Nyman et al., 2013). A clear separation of walkers and cyclists/skateboarders is conducive for walking (Rosenberg et al., 2013). T. Grant et al. (2010) referred to the combined effect of fall hazards and roadway crossings in terms of the hostile environments that older adults must navigate when getting about the neighbourhood.

A growing body of literature indicates that neighbourhood built environments, including physical features such as destinations, street layout, transportation, and aesthetics, support or impede physical activity. A large longitudinal mixed methods study (n=6,027) conducted by Hirsch et al. (2014) investigated the effects of improved neighbourhood walkability features on adults walking over a period of 12 years. This mixed methods study gathered data by interview and measured observable walkability features within a 1-mile (1.6 kilometre) radius of the participant's home. The researchers measured changes to older adults walking for transport and leisure purposes. Their findings supported other studies (e.g. Cerin et al., 2016; Giles-Corti et al., 2013; Hirsch et al., 2014; Moran et al., 2017; Van Holle et al., 2014) that high walkability (higher street connectivity and shorter distances) increased physical activity. A strength of this study was its use of a specified radius of 1.6 kilometres centred on the participant's home. The researchers used the distance for determining retail and residential zoning ratios to street networks that supported residential intensification at a neighbourhood level. Findings support associations with a mix of different land uses (e.g., residential, commercial, institutional), public transportation in more densely developed neighbourhoods, and self-reported higher walking activity (Moran et al., 2017; Rosso et al., 2011; Van Holle et al., 2014). Collectively the built features that reflect walkability are defined by an index based on residential density, street connectivity land-use mix (Marquet, Hipp, & Miralles-Guasch, 2017; Van Holle et al., 2014) and improved accessibility (Cerin et al., 2016; Hirsch et al., 2014). Walking becomes an outcome measure of a neighbourhood designed for walking. Walkable neighbourhoods are positively associated with age-friendly indicators for

older adults' physical activity and social participation (World Health Organization, 2015a). Some researchers argue that designing walkable neighbourhoods to enable people of all ages, whether or not they live with impairments, is a matter of social justice (Day, 2010).

Transportation, one of the eight age-friendly domains (World Health Organization, 2007a), is a key facet to urban mobility and indirectly to social participation (World Health Organization, 2015a). With increasing age, older adults are more likely than any other age group to have limited walking ability and find it difficult to navigate stairs or steps making many forms of public transport difficult (Mackett & Thoreau, 2015). Additionally, older adults are more likely than others to have given up driving and rely more on public transportation, thus public transportation can mitigate the loss of mobility associated with driving (Mackett & Thoreau, 2015). The importance of public transportation is identified by the World Health Organization (2015a) in its document *Measuring age-friendliness of cities: A guide to using core indicators* in which the WHO proposed transport as an age-friendly output mainly related to issues of accessibility and inclusion. For example, the number (or proportion) of public transport facilities (e.g., bus stops, rail stations) that comply with local accessibility standards will be a measure of a city's age-friendliness. The New Zealand Transport Agency, the government transport authority, supports a range of policies to ensure older New Zealanders can afford to use public transport by providing free off peak travel (Super Gold Card) and subsidised door-to-door transport services (Total Mobility Scheme). However, there are no New Zealand accessibility standards relevant to transportation, nor legislation to require such standards to be developed. In 2017, action by a community group, New Zealand Accessibility Alliance, created momentum for accessibility legislation that would bring New Zealand in line with countries such as Australia, UK, Canada and the United States. Lack of legislation requiring all public buildings, infrastructure and transportation to meet minimum accessibility standards creates a "pot luck" experience for New Zealanders living with disabilities when getting about public spaces (Hogan, 2017, September 5).

There are likely to be operational differences between rural and urban settings but generally, improvements can be made by bettering accessibility of public transport vehicles, bus stops and increasing the relevance and convenience of public transport by changing routes and/or timetables(World Health Organization, 2015b).

Studies linking transport disadvantage with accessibility have associated poor usability of public transport that extends beyond making public vehicles accessible and relates to transportation infrastructure. Studies of transportation barriers for older adults include low-walkable neighbourhoods (including walking distance to a bus stop), inconvenient bus routes, and poor timetable information (Broome, Worrall, Fleming, & Boldy, 2012; Risser et al., 2010; World Health Organization, 2015a). Neighbourhood walkability and accessibility reduces transport disadvantage for older adults who may not identify as living with disability but may live with age-related psycho-motor decline. An Australian mixed method study by Broome et al. (2012) sought to assess the impact of introducing a flexible bus route (route deviation type, user-responsive services) on ticket sales and the usability of the service measured as satisfaction. All adult users, including older adults reported increased use of the bus service where the bus route was flexible and buses had lowered floors. Consistent with that of Risser et al. (2010) standard public transport vehicles (low floor and kneeling buses) is a high ranked priority for older adult users of transport. The changes also resulted in improved satisfaction with the timetable and bus-driver friendliness (Broome et al., 2012). The findings of this study were presented from an age-friendly transportation perspective that benefits the whole population and for this reason is included in this literature review section of transportation for older adults. The demographic profiles of participants did not show a statistically significant difference between features identified important to young and older adults. A weakness of the study is its lack of analysis of older adult data when the study area has a higher proportion of older residents.

Holding a driver's license or having access to a car is often highlighted as important for mobility and social interaction in older age (Dahan-Oliel, Mazer, Gelinas, Dobbs, & Lefebvre, 2010; Levasseur, Cohen, et al., 2015; Risser et al., 2010; Therrien & Desrosiers, 2010). Driving may decrease with age largely because of the interrelationship between individual abilities and the fast and complex traffic environment. Older adults are at high risk of being severely injured or killed in an accident, especially as pedestrians (Moran et al., 2014; Oxley, Langford, & Charlton, 2010). Key features were long crossing distances that crossed over multiple lanes, and the pedestrian light phase for crossing causing older adults to rush to complete the crossing. A mixed methods study by Risser et al. (2010) investigated problems with traffic environment as perceived by older adults (n=3,309) and traffic and

planning experts (n=490) across eight European countries. Data were gathered via a mix of focus group and individual interviews; older adults (n=487) and experts (n=225) and a larger survey questionnaire. The study found that older drivers perceive traffic speed and attitudes of other drivers as barriers to getting about by walking and driving. This study adds new evidence to the literature on two levels; ranking and reasons for low response rates to traffic issues for older adults. The rankings of the older adults and of the experts are at significant variance. Older adults and experts agreed only on the need for enforcing traffic speed. The expert participants ranked issues of high concern to older adults lower, suggesting a lack of empathy for older adults' traffic-related issues. These findings have implications for age-friendly transportation.

Getting together

Getting together with others is a determinant of social health and active ageing. Participating in social activities with others can motivate older adults to stay mobile and remain socially connected. The social environment relates to the myriad of activities performed with others and the social relationships and social support that develop out of these involvements (Chaudhury et al., 2016). Aspects of social participation include contact with neighbours and friends as well as getting involved in local leisure and social activities, participating in occupational or social roles including familial and community roles. Advantages that come with developing and maintaining a variety of social relationships and involvement in the community include a sense of value and self-worth (Gauvin et al., 2012), and improved levels of trust within and feeling of belonging to a network of people with shared interests (Chaudhury et al., 2016). In addition to the direct benefits gained from positive interactions with social networks, older adults benefit indirectly by living in a neighbourhood with a high degree of social cohesion and participation (Nyqvist, Cattan, Andersson, Forsman, & Gustafson, 2013). When older adults describe neighbour relationships as both social and supportive, they contribute substantially to older adults' social networks (Nyqvist et al., 2013) and continued independence (Gardner, 2011).

Participation in the neighbourhood relates to "a person's involvement in activities that provide interactions with others in the community" (Levasseur et al., 2010, p. 2146). A content analysis conducted by Levasseur et al. (2010) of

conceptual definitions of social participation (n=43) used in research studies showed that involvement is a critical element of social participation. They identified that involvement occurred on a continuum from relatively passive to very active participation in activities and interactions with others in the neighbourhood or wider community. The researchers added to the debate by developing a taxonomy of social activities showing how the levels of involvement of the individual with others was dependent on the main goals of these social activities. Whether participating socially at the lowest of the proposed six-level taxonomy, "preparing for connecting with others" or the highest level "contributing to society" Levasseur et al. (p. 2146) aligned social participation with the WHO (2002b) International Classification of Functioning domains of participation, to show that social participation remains possible regardless of functional ability. A rigorous study, it reviewed a large number of definitions but did not include terms such as participation or civic/societal participation that could potentially have expanded the definition of social participation.

Older adults often identify that maintaining relationships is central to their wellbeing (World Health Organization, 2015b) and that social health matters most in life (Black & Dobbs, 2015). Research has consistently shown that older adults' participation in social activities is associated with positive outcomes on a variety of health indicators. These include self-rated health, depression, dementia, cognitive functioning, and health behaviours (e.g. Marquet & Miralles-Guasch, 2015a; Tunstall, Pearce, Shortt, & Mitchell, 2014). People who have larger or more diverse social networks have a lower mortality risk (Holt-Lunstad, Smith, Baker, Harris, & Stephenson, 2015), better mental health (Fiori, Smith, & Antonucci, 2007) and lower morbidity (Li & Zhang, 2015) than those who are more socially isolated. Epidemiologic studies investigating how neighbourhoods and neighbourhood participation affect health often study the negative health effects. Such research has shown higher mortality and morbidity that emphasises the negative effects of high crime and inadequate services. Data from three UK cities demonstrated that lower levels of social participation, trust and reciprocity in Glasgow city, a city with high crime and poor infrastructure may explain higher mortality rates compared with two other UK cities of lower crime rates (D. Walsh et al., 2015). While social capital is positively associated with health outcomes, its antithesis, social isolation, has negative health outcomes (Holt-Lundstad et al., 2015).

Being socially included in one's community is important for wellbeing and may be even more important as people age and mobility declines. Ability to build and maintain relationships and social networks are closely related to a range of social competencies and these may decline with ageing (Holt-Lunstad et al., 2015; Nyqvist et al., 2013). Age-related functional decline and loss of spouse, friends and family with advancing age contribute to a decline in the quality and quantity of social relations placing older adults at risk of isolation and loneliness (Holt-Lunstad et al., 2015; Nyqvist et al., 2013). The negative impact on health, wellbeing, and premature mortality are significant compared with health behaviours of physical inactivity, obesity and substance abuse (Holt-Lunstad et al., 2015). The comparison makes this social issue a matter of public health concern. Data suggest loneliness is common among older adults and projected to increase (Holt-Lunstad et al., 2015; Nyqvist et al., 2013). Contrary to this projection, the findings of a recent cross-sectional Swedish survey (n= 2,572) showed no increase in the prevalence of loneliness in people aged 77 years or older between 1992-2014 (Dahlberg, Agahi, & Lennartsson, 2018). The study supports earlier studies (Hand et al., 2017; Holt-Lunstad et al., 2015; Nyqvist et al., 2013) identifying associations between being female, higher age, and lower education. Projected increase in rates of adults over the age of 85 years in developed countries, suggests possible increase in loneliness and social isolation in years to come. It has been well documented that the social benefits of everyday mobility reduces loneliness and social isolation (e.g. Levasseur, Cohen, et al., 2015; Mackett & Thoreau, 2015). Unable to get about, older adults are more likely to become isolated and excluded. Social exclusion has considerable potential to explain and respond to disadvantage in older age (K. Walsh et al., 2017).

Changing social and economic structures of the neighbourhood contributes to older adults feeling that nobody cares. Older adults who perceive they live in a neighbourhood that lacks social cohesion, report lower levels of walking (Ory, Towne, Won, Forjuoh, & Lee, 2016) and lower involvement in social activities (Bowling & Stafford, 2007 ; Buffel, De Donder, et al., 2014; Chaudhury et al., 2016; Yen, Shim, Martinez, & Barker, 2012). In a qualitative study, 146 older adults living in eight deprived inner city neighbourhoods in England and Belgium were fearful and felt vulnerable (Buffel, McGarry, et al., 2014). Fear of crime caused the older adults to avoid an increasing number of places where 'strangers' or large groups of immigrants gather. Older adults characterised their neighbourhoods by a sense of

'lost' community (Buffel, McGarry, et al., 2014). Loss of social connections and belonging contributed to social exclusion of the participants. An earlier UK study by Bowling and Stafford (2007), found that both subjective and objective measures of the neighbourhood independently contribute to social activity among older adults. Older adults' perception of the neighbourhood as neighbourly and having good facilities was associated with higher levels of participation in social activities. Yet the association was stronger for subjective than for objective measures that suggests where there is a 'sense of community', or a feeling of belonging to the neighbourhood, there is possibly greater involvement in neighbourhood activities. These findings are supported by later studies reinforcing a neighbourhood perceived as friendly and supportive is independently associated with an increased likelihood of participation in both physical and social activities (Chaudhury et al., 2016; Chaudhury et al., 2012; Yen et al., 2012). In contrast, deficient relational communities, declining social capital, reduced social participation and social cohesion contribute to exclusion of older adults from their neighbourhood and community (Buffel, De Donder, et al., 2014; K. Walsh et al., 2012; K. Walsh et al., 2014).

Getting about and connecting

Getting about the neighbourhood creates a feeling of being connected (Levasseur, Généreux, et al., 2015; Ziegler & Schwanen, 2011). Neighbourhood walkability and availability of facilities for preferred physical activities may predict greater social participation by older adults (Richard, Gauvin, Gosselin, & Laforest, 2009; Rosso, Taylor, Philip Tabb, & Michael, 2013). Having access to services and amenities, for example, food shopping, banking and social clubs and mobility, act as facilitators to social interaction and connection (Levasseur et al., 2011; Levasseur, Généreux, et al., 2015). Walking with friends or walking the dog affords physical and social benefits for older adults (Ory et al., 2016).

A study of rural/urban built neighbourhood features found similarities and differences of environmental effects on social participation. Based on an analysis of cross-sectional data (n=1198), there were no urban/rural differences in social participation but a number of environmental variables did influence opportunities for social participation (Levasseur, Cohen, et al., 2015). Social participation of adults (67-82 years) living in metropolitan and urban areas was associated with access to

public transport and better quality social networks. In rural areas the presence of children living in the neighbourhood, more years lived in their home and having a driver's license influenced social interaction (Levasseur, Cohen, et al., 2015). The rural/urban average number of social activities participated in per month did not differ by area and the top three activities were the same for all areas (visiting, shopping, and going to the restaurant, pub or café). (Levasseur, Cohen, et al., 2015). Environmental factors, transportation and social networks facilitate social participation yet they could explain only small percentages of the variance in social participation in the study. The finding supports earlier studies (e.g. Black & Dobbs, 2015) demonstrating the importance of individual preferences for activities related to social participation. While personal preferences are key to social participation, Levasseur, Cohen, et al. (2015) findings also confirm a number of earlier studies demonstrating the importance of mobility, proximity to amenities and accessibility to resources for social participation (Levasseur et al., 2011; Moran et al., 2017; Richard et al., 2009; Richard et al., 2013).

In her seminal work, Jacobs (1961) described the presence of many people moving about the streets in terms of vitality but also in terms of 'eyes on the street' giving it a feeling of being a safe place. She posited that vibrant and safe neighbourhoods are places designed with mixed land use and quality pedestrian infrastructure to encourage continuous street use and to enable social interactions and cohesion (i.e., 'eyes upon the street'). The mixture of residence, recreation, and commerce in one neighbourhood would contribute to social interactions and mutual support contributing to social capital of its residents (Lager, Van Hoven, & Huigen, 2015; Scharlach & Lehning, 2013; D. Walsh et al., 2015). Jacobs's key theme of neighbourhood social inclusion, safe from crime through 'citizen surveillance' where people are getting about and using the streets, keeping an eye on what is happening, is evident in studies of social participation and pedestrian activity. Recent studies support Jacobs' findings, that older adults living in neighbourhoods with lively pedestrian street activity are more likely to engage in more activities contributing to neighbourhood vitality (Marquet & Miralles-Guasch, 2015a). When a neighbourhood has a number of older age-peers living in it older adults are more involved in activities and perceive the neighbourhood as safe (Hand & Howrey, 2017b). The presence of people in the streets increased feelings of personal safety when they were in family groups, appeared friendly and familiar, and when walking and jogging.

Conversely, large crowds, intimidating groups of youth and beggars contributed to fear for personal safety, incivilities, and what is described as a nuisance factor (Burholt, Roberts, & Musselwhite, 2016). From a broader social perspective, and as part of Active Aging and Age-friendly Cities initiatives, walking can contribute to the visibility and social participation of older adults (Beard & Petitot, 2010; Moran et al., 2017; Plouffe & Kalache, 2010). Walking activity on the streets is a product of the diversity of the built environment and a measure of neighbourhood vitality (Marquet & Miralles-Guasch, 2015a).

Opportunities for informal social interaction are facilitated by features such as regularly spaced seats in the neighbourhood (Zeitler & Buys, 2015). Seats along the walkways and footpaths add to the liveliness of the neighbourhood by providing opportunities for sitting and interacting with others. A qualitative study by Ottoni et al. (2016) took a social-ecological perspective to explore how seat benches influence the social environment of the neighbourhood for 28 adults aged 65 years and older. Sitting on the bench facilitated social interaction contributing to a feeling that the "benches become porches" (Ottoni et al., p. 39) and the liveliness of the benches added to the neighbourhood character. Ottoni et al. (2016) demonstrated that knowledge of a bench within walking distance gave older adults, particularly those living alone, a reason to get out and about. Findings of an earlier, larger study demonstrated association between longer walking distances (2 kilometres), lack of resting places and hills with loneliness in adults aged 75-90 years (Rantakokko et al., 2014). The more environmental barriers encountered by the study's participants (n= 848), regardless of personal walking difficulties, the more they reported feelings of loneliness. Bench seats located with a good viewpoint and something to watch, and seats that have a back and armrests are considered necessary for more frail older adults enabling them to get about (Holland et al., 2007) and possibly stay connected (Ottoni et al., 2016). Findings also showed that the seats taken by 'street people' was a barrier to using them, contributing negatively to the experience of walking in the neighbourhood.

The potential benefits of older adults' local social contacts differ depending on the place of social interaction within the neighbourhood and the expectations associated with these interactions (Lager et al., 2015). A small qualitative study conducted in a village in the Netherlands with a relatively large proportion (25%) of adults over 65 years, found older adults had limited opportunities for meeting

younger neighbours and, when they did encounter them, their expectations for sociability were not met (Lager et al., 2015). Yet the participants did not necessarily benefit from interactions with their peer group. Meeting places, coffee mornings and activities for older adults were negatively valued as 'old age' spaces with 'old people' conversations. These findings supported an earlier study (Ziegler, 2012) that spaces and activities identified specific for older adults did not offer a positive age-identity. Nevertheless, the older participants in Lager et al.'s (2015) study understood the benefits to their health and mobility and continued attending. The locations preferred for opportunistic social activity vary for individuals, but also age differences are reflected in where interaction occurs. Places important for older adults include parks, small local shops, cafes and community organisations/clubs (Gardner, 2011). Spaces that people pass through in the course of daily life; for example, sidewalks, lines in banks and grocery stores and seats on public transport assume importance in older residents' social lives as opportunity for social interaction (Gardner, 2011; Lager et al., 2015). Social participation through spontaneous and informal connections builds community bonding and enables the older adult to remain socially involved and to develop a depth of connection to the neighbourhood (Buys et al., 2015). However, rather than the mere presence of these local 'opportunity' structures it may be the extent to which facilities are *perceived* to be age-friendly and comfortable that is more important for explaining social participation in old age (Black & Dobbs, 2015; John & Gunter, 2015).

What mattered to community-dwelling adults aged 65-98 years most was having a wide range of activities and social opportunities. An exploratory qualitative study using mostly focus groups (n=57) and surveys (n=216) sought to understand what matters most to older adults (Black & Dobbs, 2015). Thematic analysis of the data from this small US community study found participating in meaningful social opportunities mattered to these older adults. Participants described involvement in a wide range of activities depending on their personal interests and that having a wide range of social opportunities was as important as the activity itself. The activities that mattered most related to learning for preserving mental health and spiritual growth, and voluntary activities for continuance of previous interests and giving back (Black & Dobbs, 2015). Quality of life is more closely linked to older people's satisfaction with social participation and not with their accomplishment levels (Levasseur et al., 2010). The quality of the relationship and how the older adult is perceived is more

significant than the number of social encounters or the network size (Ziegler, 2012). Evidence suggests older women's social networks and relationships are fundamental to satisfaction with their neighbourhood. Neighbours play an important role for women over 75 years, providing a sense of trust and reciprocity. Where they experienced trusting relationships they reported their neighbourhood safe and comfortable (Walker & Hiller, 2007).

Contributing

The notion of contribution through giving to others or giving back to society supports the notion of reciprocity as social exchange and recognisable in a number of studies (Black & Dobbs, 2015; Scharlach & Lehning, 2013). Volunteering, as a form of social participation has been studied from the perspectives of the personal benefits of volunteering to the older person and from a societal perspective in terms of service provided to a community (Cattan, Hogg, & Hardill, 2011; Morrow-Howell, Hong, & Tang, 2009; Stephens et al., 2015; Wiles & Jayasinha, 2013). Older adults' voluntary work can include a wide range of unpaid activities usually through some form of organisational network or group or informally by care-giving (Morrow-Howell et al., 2009; Stephens et al., 2015; Wiles & Jayasinha, 2013). Many physical, social, and psychological benefits of volunteering have been reported by older adults (Anderson et al., 2014; Morrow-Howell et al., 2009; Zaninotto, Breeze, McMunn, & Nazroo, 2013). Drawing on a qualitative study conducted in New Zealand, participants (n=121) aged 56-92 reported a personal sense of identity, self-worth, and meaning by way of emphasising the important social role they played through volunteering (Wiles & Jayasinha, 2013). The study found that participants recognised the social value of volunteering as a way of building new relationships and social contacts (Wiles & Jayasinha, 2013). This supports the notion that volunteerism helps build social networks, connectivity and belonging associated with social capital (Aird & Buys, 2015; Buys et al., 2015; Menec et al., 2011). The appreciative methodology of the study encouraged a positive focus on contribution that showed the benefits of contributing to others and community in turn benefitted the individual's sense of wellbeing and belonging (Wiles & Jayasinha, 2013).

The notion of contribution through giving to others or giving back to society supports the notion of reciprocity as social exchange and recognisable in a number of studies. Being able to give back and make a difference "enhances life" and provides

a sense of meaning and purpose (Black et al., 2015; Cattan et al., 2011). An American based qualitative study conducted by Black et al. (2015) found that older adults want to choose areas of personal interest in which to become involved. Using their skills and knowledge, giving time and energy to lifelong interests is being useful. These participants recognised that it keeps them active, and keeps them part of the community. The older adults benefit through the social connections and relationships they make and the community benefits from their contributions (Black et al., 2015; Wiles & Jayasinha, 2013). Social participation through spontaneous and informal connections build community bonding and enables the older adult to remain socially active and develop a depth of neighbourhood engagement (Buys et al., 2015) believed key to social capital (Aird & Buys, 2015; Menec et al., 2011).

Scholars and policy makers argue that civic participation through voluntary involvement is ingrained within the social capital framework (Andrews & Phillips, 2005). A theoretical analysis of barriers and motivators for volunteerism in the US purports that older adults are more likely to participate in informal volunteering, care-giving and companionship in preference to civic activities (Martinez, Crooks, Kim, & Tanner, 2011). These authors argue that such work sits hidden in the private domain. For this reason informal volunteerism is largely invisible in research on older adults' civic participation. The value of older adults contributions to society through caregiving and informal volunteering are often lacking from the research and definitions of civic contribution. They conclude that formal volunteering and political activities are the predominant activities considered as civic contribution and the main focus for research on volunteerism (Martinez et al., 2011). This argument is in part supported by the absence of data on older adults contribution to certain organisations and associations (e.g., churches), and serves further to exclude some groups and activities from the conversation on civic participation (Martinson & Minkler, 2006).

Drawing on longitudinal panel data from the Americans' Changing Lives Study, Hinterlong (2008) found that caregiving and informal volunteering are widespread among older adults. Researchers have explored the idea that some groups benefit more than others have from volunteering. Early studies showed adults in advanced age benefitted more (Morrow-Howell, Hinterlong, Rozario, & Tang, 2003) and later studies, that older adults with fewer personal and social resources experienced more positive outcomes (Morrow-Howell et al., 2009). People who are

more disadvantaged, lower income, lower educated, and single older volunteers perceive more benefits from volunteering (Morrow-Howell et al., 2009; Wiles & Jayasinha, 2013) supporting the idea that people in lower socio-economic status gain most from volunteering. However, research shows there are fewer opportunities for adults in lower socio-economic groups to be involved in volunteering which may be related to poor health, lack of transportation and finances (Tang, Morrow-Howell, & Choi, 2010). Drawing on further research it appears adults in advanced age are less likely to volunteer but when they do give their time and help, they are more committed (Tang et al., 2010). Having a driver's license was a significant factor in voluntary participation by older Australians (n=48 adults aged 56-93 years). The study that found twice as many older adults with a current drivers were involved in voluntary work compared with those who no longer had a driver's license (Aird & Buys, 2015). A qualitative study (Martinez et al., 2011) of the enablers and barriers to volunteering of adults (n=68) over 65 years support that perceptions of ability, time and money constraints and functional health problems were barriers to volunteering in general. Further barriers identified in this study relate to time and role flexibility. Constraints imposed by the organisation that failed to value their contribution and made demands that created a sense of it being 'work without pay' lead to volunteer reluctance. The data indicate that socio-structural factors such as class, race and gender were associated with access to organisational volunteering roles (Martinez et al., 2011). These barriers hold particular relevance for bolstering age-friendly urban neighbourhoods that encourages both connection and civic contribution.

Governance

Social integration of older adults into their neighbourhood is reflected in the social and economic structures and systems. Instrumental and social support offered by neighbours influences the social integration of older adults (K. Walsh et al., 2014). The social and economic effects of a downturn in the national economy can exclude older adults. For example, lost vitality in local business and businesses closing down affected day-to-day-social contact that in turn influenced the age-friendly dimensions of inclusion, participation, and community and support services for older people in rural and urban Ireland (K. Walsh et al., 2014). Older adults can be excluded in

multiple ways including their neighbourhoods, social relations, and civic participation (K. Walsh et al., 2017).

Excluded from key systems and institutions, older adults have limited opportunity of contributing to local issues, including those issues most likely to affect the older population (K. Walsh et al., 2014). Although older residents spend much of their time in the neighbourhood, their relatively low socio-economic status, due to being out of the workforce, has made them the least included population group in decision-making processes. A key component of age-friendly efforts is the meaningful participation of older adults; indeed, this is viewed necessary to ensure the success of local initiatives (Menec et al., 2011). The importance of engaging older people as drivers and owners of age-friendliness is becoming more apparent (Buffel & Phillipson, 2016). Concern for a lack of strong consumer-led direction for change suggests that including older adults will raise community awareness and thus raise community consciousness. Studies have shown difficulty ensuring diversity in the 'voice' of older adults, with a tendency toward younger, 'healthy' older adults' contribution (Lehning & Greenfield, 2017) and marginalised populations remain excluded. For example, those who are healthy and aged in their 70s have quite different priorities to those in their 80s at higher risk of functional impairments or disability. Age-friendliness underlines the notion of 'active aging,' which means the participation of older people in economic, social, cultural, spiritual and civic issues. Indicators for age-friendly initiatives are to be appropriate to the local need and to the way in which older adults are encouraged, creating opportunities to participate meaningfully in planning and developing age-friendly neighbourhood initiatives (Buffel et al., 2012)

The Research Gap

The work of the WHO to drive policy and programs to support age-friendly cities has emphasised features of the built environment and, to a lesser extent, the social neighbourhood environments necessary for supporting older adults. There has been no meta-analysis of the physical and social environmental impact on participation. The participants of the studies reviewed were predominantly 65 years and older and, to the best of my knowledge, there are few empirical studies focusing on participation of community dwelling adults over the age of 85 years. By far the majority of studies on older adults' participation are that of adults in the range of 55-

74 years. My review of the literature has found those studies that include adults over the age of 85 years rarely analyse the particular data for this age group. Thus, the question of neighbourhood participation in advanced ageing is a largely understudied area of research.

In addition, the age-friendly literature can learn from attention to the experiences of very old adults. The age-friendly framework can provide the mechanisms to support and promote participation and to bridge the findings across disciplines using a common language. For example, neighbourhoods may affect social participation via walkable streets with a variety of destinations and good pedestrian infrastructure. Perceptions of neighbourhood social capital and neighbourhood social cohesion have been found to be associated with participation of older adults but their effect on adults' experience in advanced older age has not been investigated.

I begin this study thinking of participation as 'doing' things with and for others. It is those activities and roles the older person involves themselves in with others for personal well-being and self-development. Participation also has a public benefit that implicitly contributes to the economy in some way e.g. volunteering, paid work or caring for family/friends. The benefits of participation are well documented but what is not known is the experiencing of participation. What is the 'in the moment' experience of participating? The broad and nonspecific nature of participation as "the person's involvement in a life situation" (WHO, 2001) helps keep me open to exploring the meaning of participation as it is lived in older age.

A range of approaches have been used to measure the relationship between characteristics of the neighbourhood and aspects of older adults' participation, most notably mobility-related participation. Each of these measures has their own strengths and weaknesses. For example, research methodology is primarily cross-sectional and residents' perceptions of neighbourhood safety or degree of connectedness are surveyed by way of questionnaire. Although researchers are able to explore how older adults experience their neighbourhoods, there are a number of limitations. These studies are mainly conducted in the US, Canada or Europe, a small but growing number in Asia and very few Australasian (New Zealand and Australia) studies. There were few studies found that have explored the experiences of participation within the neighbourhood and fewer that studied the experiences of

those over the age of 85 years. Of those that explored the meaning older adults attribute to their experience of participation, a very small number used a phenomenological approach. Everyday participation is often looked upon as trivial and self-evident, but these trivial things are believed to affect the experience of daily lives of ordinary people. Everyday life is presumed to be "mundane, familiar and unremarkable" (Scott, 2009, p. 2). It is evident that there is a lack of knowledge about the meaning of everyday experiences of neighbourhood participation by adults 85+ years. This study will use a phenomenological research approach, where older adults are involved through telling their experiences, in the knowledge the results will be disseminated for use in policy and age-friendly community development in New Zealand.

Summary

A review of theoretical and empirical evidence of older adults' neighbourhood participation demonstrates multiple environmental and individual characteristics. These are interrelated and exert independent and interactive effects on older adults' participation. Theoretical perspectives of age-friendly communities, ecological theory, and place-integration theory contextualised the person-environment interactions of neighbourhood participation. A good number of cross-sectional quantitative and qualitative studies used objective, subjective, or mixed methods to identify effects exerted by the built structures and services on participation; for example, the effects of transport, mixed use of land and pedestrian infrastructure on both physical and social participation. Moreover, studies identified the social 'climate' of the neighbourhood, for example its friendliness and the inclusiveness of older adults in neighbourhood activities, affects the social participation and contribution of older adults. These environmental effects are strongly evident in three of the eight age-friendly community domains; built environments and services, transportation, and social participation. In spite of increasing evidence suggesting that neighbourhood matters to older adults' participation, it is still not clear how older adults experience neighbourhood participation. There is very limited evidence to draw on for understanding older adults' lived experience of urban neighbourhood participation for application to age-related health and public policy. This study seeks to address the lack of phenomenological research by studying the meaning of everyday urban neighbourhood participation in adults over 85 years of age. In the

following chapter, I will outline the hermeneutic phenomenological methodology used to conduct this study.

Chapter Three: Methodology

Introduction

Phenomenology concerns itself with everyday modes of existence (Heidegger, 1962/2008); thus my thinking about the question pointed in the direction of this philosophical and methodological approach. Using a hermeneutic phenomenological approach, the aim of this research project is to examine the everyday lived experiences of older adults' participation in the urban neighbourhood. In this chapter, I will outline the nature of my research question, and how it drew me to the philosophy and methodologies of Heideggerian phenomenology and Gadamerian hermeneutics. The following discussion introduces the key phenomenological notions relevant to my thinking and understanding of older adults' everyday participation.

The Nature of the Question

The nature of my research question is ontological which is to say that it seeks to illuminate the experience of neighbourhood participation as it is lived. I assume that an older adult going about his or her neighbourhood will already have an understanding of what participation means. Much is empirically 'known' about participation; yet less is known about participation of older adults in their neighbourhood, and less still is known of participation as it is experienced and told by the older adult. The telling of ordinary experiences provides a window to new understandings that exists deep within their stories. Their stories present as teachings and the learning is in the interpretation of these teachings. The multifaceted nature of participation, and multiple meanings inherent within, called for an interpretive paradigm that explores what the lived experience of neighbourhood participation means to older adults. New understandings potentially open the window to new thinking about planning for older adults' participation in urban neighbourhoods. Accordingly, I was drawn to the methodology of interpretive phenomenology from a hermeneutic perspective informed by the philosophers, Martin Heidegger [1889-1976] and Hans-Georg Gadamer [1900-2002].

Phenomenological Underpinnings

Three different schools of phenomenological philosophy developed in Germany in the early 19th century and challenged the dominant epistemology of the time

(Gadamer, 2004/2013). It is both a research methodology and method fitting to projects that seek to understand the complex nature of 'being human'. Phenomenology can be *descriptive* guided by the work of Husserl, *interpretive* as developed by Heidegger and Gadamer, or a combination of *descriptive and interpretive* phenomenology and includes scholars such as van Manen. The central tenets of phenomenology lie in understanding the phenomenon of phenomenology which orientates it towards understanding "the things themselves" (Heidegger, 1962/2008, p. 58).

Phenomenology is the science of phenomena and its starting point is lived experience (van Manen, 2001). A phenomenon is an "event or a lived-through experience as it shows itself or as it gives itself when it makes its appearance in our awareness" (van Manen, 2014, p. 65). To make sense of this definition is to appreciate the philosophical stance of phenomenology as a study of how appearances 'appear' in everyday lived life. In our everyday life we (human beings) do not ordinarily reflect on our everyday experiences, they are so part of our everyday practice we do not give them a thought. We simply live through them, often without being consciously or reflectively aware of the experience/s; they simply come and go. The taken-for-granted experiences are lived in a natural attitude, that is to say, they are pre-reflective experiences that we ordinarily live in and live through in our day-to-day existence. It is only when an event occurs and we recount it as a 'thing' that happened that we are reflectively aware of the experience. Conversely, a phenomenological attitude is where nothing is taken for granted, where one questions and suspends the 'taken for granted' and 'how things are' and adopts a more reflective perspective (Fry et al., 2017). Phenomenology is primarily a philosophical methodology that aims to reveal the meaning within lived experience. Heidegger took the Greek word *aletheia*, choosing to name the 'truth' as 'unconcealment' drawing something forgotten into visibility (Harman, 2007, p. 92). While phenomenology is the study of how things show or give themselves, they do not show themselves because we turn to them. When things show themselves, they can only do so because they have already given themselves to us (Marion, 2002).

Phenomenological enquiry seeks to understand what shows itself in this or that lived experience or event. Any experience we have in our everyday lives can be a phenomenological topic. In relation to this study, the topic of older adults' everyday neighbourhood participation led me to wonder on its lived meaning. The

wondering led to deeper and deeper questioning that lies in the realm of being human. What does the experience of neighbourhood participation mean for older adults? What happens in the experience of everyday neighbourhood participation? What is the lived meaning of neighbourhood participation? While Husserl's fundamental emphasis was on description, Heidegger was concerned with understanding the phenomenon. That is, Heidegger considered the primary focus to be on the nature of existence (ontology), while Husserl was concerned about the nature of knowledge (epistemology). Irrespective of the schools of thinking, phenomenology seeks to understand something as an event and not as an object. This distinction appears straightforward; however, it is difficult not to objectify or theorise, because this is a natural attitude, it is what we, as humans, ordinarily do. To objectify things is to "de-live" them (Harman, 2007, p. 23). Harman explained, that for Heidegger, knowledge always reduces and oversimplifies things into concepts whose basic features can be clearly listed. The ontic, or empirical knowledge, characterises the concrete and observable beings or things of the world. Heidegger (1962/2008) implied "that which is ontically closest and well known, is ontologically the farthest and not known at all; and its ontological signification is constantly overlooked" (p. 69). While this distortion is inevitable, it is a distortion nonetheless (Harman, 2007). From this basis, my study focuses on the ontological. Hermeneutic phenomenological research seeks to reveal the ordinary experiences, the lived moment; and in dwelling on these moments, we can better understand the world. The underpinning philosophy recognises that by bringing to awareness and interpreting the experiences of older adults' neighbourhood participation, thoughtful neighbourhood planning and development might emerge. Accordingly a question I may ask of my findings is 'how can older adults' participation in city neighbourhoods be protected and nurtured?' It may be possible to ensure that city neighbourhoods are relevant for older adults' everyday living. This approach fits with the phenomenon of older adults' everyday experiences and draws on some Heideggerian and Gadamerian notions.

The quest of phenomenology is meaningfulness. Heidegger took the position that "everyday lived experience is meaningful and yet superficial" (van Manen, 2017, p. 811). It only takes on 'rich', 'hidden', 'mysterious' meaning when a phenomenological position is taken up by asking the question "what is this (phenomenon) lived experience like"? van Manen (2014) argued that the starting

point of phenomenological research is largely a matter of identifying what it is that deeply interests you or me, and then to identify this interest as a true phenomenon, that is, as some experience that human beings live through. The lived experience is the "ordinary experience that we live in and that we live through for most, if not all, of our day-to-day existence" (van Manen, 2014, p. 28); life as we live it. In this study, the ordinary experience lived through was that of participating in neighbourhood.

Phenomenology is interested in recovering the living; the pre-reflective moment of the lived 'now'. The pre-reflective experience is where the origin and meaning of meaning lies (van Manen, 2017). Heidegger referred to the 'now' as the point of contact between present and future, such is the enigma of the living moment. Methodologically studying the lived moment is exploring the experience in its pre-conscious existence before the moment of its arrival in the conscious state. Therefore, it guided my aim to elicit accounts of neighbourhood participation as they happened.

From a phenomenological stance, life as we live it is a constant experiencing or living through the 'now' whether the now is a fleeting moment of a smile or the temporality of 'being old'. Pre-reflective or lived experience is the moment of the 'now' and yet when we try to reflectively capture the 'now' moment it has already passed. It has moved from the pre-reflective to reflective consciousness on the event, where the event can be named and described. The main task of phenomenological research is an interpretive description of the living moment of the 'now' experience before we have reflectively grasped it. For example, my neighbour told of how she nearly fell while walking to the local grocery store (dairy). She reflected on how she almost lost her balance when tripping on the uneven footpath. She described and named that moment but the meaning of *nearly falling* lies embedded in the pre-conscious neighbourhood walking experience. When the event is captured in words we "unwittingly…bring experience to a halt" (van Manen, 2014, p. 105). The descriptive concepts such as walking, tripping, and falling cause us to focus on a taken-for-granted understanding of what these mean and so minimising the experiential meaningfulness of the overall experience of getting around the neighbourhood. The original rich primordial experience of neighbourhood walking is lost to the positivistic forms of inquiry. Yet language is how we access things of our world and it is through language that life is able to appear to itself. Hence, the

challenge of phenomenology is creating rich descriptive text guided by the pre-reflective lived experience without falling into the trap of conceptualising, thematising, or theorising. While one phenomenologist, van Manen, suggested investigating a particular lived experience, Heidegger is concerned with experience itself. Heidegger distinguished between the thing experience and experiencing experience. From Heidegger's perspective, phenomenology is not making experience a thing but rather experiencing experience while living it (Quay, 2016).

As this study sought to explore and interpret how everyday neighbourhood participation is lived, I was interested to find how it "appears" in older adults lived life. What appears as everyday neighbourhood participation in the literature is conscious involvement in a range of activities. However, as it appears in the literature is not clearly apparent in its lived experience. The lived meanings of the phenomena are largely hidden or concealed in their appearance (Harman, 2007). Phenomenology works to reach beneath the terminology and embedded theories and the conventions of the current language in an individual's account whose experiences are being described (Lingis, 2017). Thus, as a phenomenon of interest, neighbourhood participation is covered over. Not only are phenomena present to us in consciousness, "but more is present in these phenomena than meets the eye…The phenomena have greater richness and depth than they seem to have at first" (Harman, 2007, p. 40). The purpose of this phenomenological study is to throw light on what is hidden in order to gain insights and understandings that challenge taken-for-granted assumptions of how things are; of what everyday neighbourhood participation means.

Heidegger argued that what things really are is events (Harman, 2007). "Human life is not something visible from the outside, but must be seen in the very act, performance, or execution of its own reality, which always exceeds any of the properties that we can about it" (Harman, 2007, p. 25). Accordingly, this study proposes to express the phenomenon of older adults' everyday neighbourhood participation as they give themselves and to investigate the origins or essence of the taken-for-grantedness of this phenomenon. As a phenomenological study its aim is to reveal the meaning within lived experience through concerted questioning and provoking thinking towards "the mystery of what 'is'" (Smythe, Ironside, Sims, Swenson, & Spence, 2008, p. 1391). In a phenomenological study, experience forms the starting point for inquiry reflection and interpretation.

In line with the purpose of phenomenology this study aims to uncover and see through the "presumptions and suppositions that shape our understanding of the world and understanding of life" (van Manen, 2014, p. 55) and bring the reader to "see" something that enriches their understanding of the phenomenon of everyday neighbourhood participation. The study was designed to let the meaning (being) of everyday neighbourhood participation through or (un)conceal the taken-for-granted aspects the phenomenon.

The Philosophers

At the heart of phenomenology is a philosophical fascination with the question of the origins, sources, and meaningfulness. Martin Heidegger and Hans-Georg Gadamer offer substantive and methodological insights for this interpretive research.

Heidegger

Heidegger's philosophy developed at a time when German philosophy was in a state of struggle between new-Kantianism and liberal theology. The school of philosophy established by Husserl is where Heidegger, a student, colleague and successor of Husserl, established himself. As a student of Husserl, Heidegger initially learned an epistemological way of understanding the world where the focus was on the nature of knowledge (epistemology), and human beings as 'knowers'. In his publication *Being and Time*, Heidegger challenged existing Husserlian phenomenological ideas arguing that it was mostly descriptive and focused on the structures of consciousness. He asserted that in order to understand the essence of a phenomenon it was necessary to interpret and not to measure and explain its qualities as they were experienced in the world. Focusing on the 'whatness' of the phenomenon - the essential nature or essence of some 'thing' – is an exploration of the qualities that make the thing what in essence is itself.

However, for Heidegger what something 'is' ultimately eludes and hides itself (van Manen, Higgins, & Riet, 2016). What 'appears' both reveals and conceals in terms of meaning so Heidegger seeks to come to 'understanding' the moment. Husserl advocated 'bracketing' or suspending judgements and biases about the phenomenon in order to remain objective (Dowling, 2004) which Heidegger (1962/2008) subsequently argued was not possible on the grounds that presuppositions or pre-understandings are part of being human.

Heidegger, reoriented phenomenology from an epistemological towards an ontological way of thinking of what it might mean to 'be'. His focus shifted toward experiences and the meaning within the everyday experience of being human (Laverty, 2003). In *Being and Time,* Heidegger reassessed the most basic values and assumptions of Western civilisation, including the drive to know. In the first instance the concept of 'Being' contrasts with 'knowledge' and with 'science'. For Heidegger this understanding of being was not an epistemological problem of the spiritual sense of Being, but an ontological concern: "everyday way of being in the world is understanding the world as an event of being" (van Manen, 2014, p. 231). Heidegger took a hermeneutic approach by studying the concept of being in the world rather than knowing the world. Instead of asking the Husserlian question of how the being (essence) of things are constituted in the consciousness, Heidegger questioned how the being of being (meaning) shows itself to us. He argued that what something "is" ultimately eludes and hides itself. What "appears" is a revealing and a concealing in terms of meaning. For Heidegger (1962/2008), philosophy is ontology and "ontology is possible only as phenomenology" (p. 31) and "phenomenology is the way into ontology" (Annells, 1999, p. 5).

Heidegger asserted that in order to understand the essence of a phenomenon it was necessary to interpret and not to measure and explain its whatness. Heidegger shifts from ontic meaning of something (whatness of being) to ontological meaning of something (mode of being). Thus, ontic knowledge characterises being and not their being. The aim of understanding a phenomenon is to understand the ontological mode of being of the being (meaning) of that phenomenon (van Manen, 2014). For Heidegger every way of being in the world is a way of understanding the world as an event of being. Certain modes of being in the world already exist in neighbourhoods and might be seen in neighbours talking together or looking out for each other.

Neighbourhood participation is a relational way of being; it is a way of being with others in the world. Heidegger's focus on the experience and the meaning inherent within the everyday experience of being human (Laverty, 2003) drew me to his teachings. I want to understand what it means to be an older adult of advanced years living day-to-day life within the neighbourhood. The more I read Heidegger's philosophical teachings, the more I came to appreciate the depth and breadth of my research question and its 'fit' with these philosophers. In order to understand the experience of the phenomenon, I was drawn beyond a descriptive account of

neighbourhood participation right to the heart of 'the 'being' of being an older adult living through ordinary everyday neighbourhood participation.

Before I progress I feel I must acknowledge Heidegger's controversial association with the Nazi party should this be cause for some to discredit my study. Heidegger's controversial association with the Nazi party has been the subject of much debate as to the reasons for his involvement and the extent to which that commitment compromises or taints his thinking as a whole (Clark, 2011; Malpas, 2006). Concern that his philosophy has been imbued with Nazism has been the subject of much academic debate but the criticisms are largely without substance. By way of testament to his thinking, Heidegger did have a great following including Jewish philosophers such as Hannah Ardent, Jacques Derrida, and Emmanuel Levinas (Harman, 2007). Therefore, I hold in my mind two almost irreconcilable facts; Heidegger as one of the greatest philosophers of the 20th century and Heidegger as supporter of the National Socialist German Workers' Party (the Nazi Party), at least for a time. In my own readings of Heidegger's work, it appears he opens up thinking and a focus on the lifeworld. Nevertheless, I am mindful of his involvement with the Nazi party as I work with his philosophical thinking and contribution to understanding the world of 'being' which is the focus of this thesis.

Gadamer

Hans Gadamer [1900-2002], a student of Heidegger, further developed philosophical hermeneutics as a phenomenology of human understanding, referred to as hermeneutic phenomenology. For Gadamer, hermeneutics was less concerned with how we come to understand and more about the conditions within which understanding occurs (Laverty, 2003). Gadamer's notion of understanding our world is from within our existence and, similar to Heidegger's view, that we act within a world of bodily, personal, and cultural practices (Laverty, 2003). Being-in-the-world is being situated in the contexts of our lived experiences. The contexts of particular concern to Gadamer are tradition and language.

Gadamer (2004/2013) argued language is fundamental to understanding the world. Language not only facilitates understanding it "is the universal medium in which understanding occurs" (p. 389). It is through language that understanding is

possible. Thus, Gadamer moved from Heidegger's ontological focus on the lived experience of being, towards interpreting text. He carefully explores the role of language and argues that the text be approached with openness and sensitivity to the historical tradition and interpretive horizon of the text (van Manen, 2014). "Language is the universal medium in which understanding occurs" (Gadamer, 2004/2013, p. 407); it is the linguistic experience that makes understanding possible. Interpretation occurs through the 'fusion of horizons', a term Gadamer uses to explicate a process whereby past and present come together in the medium of language to achieve understanding.

An important notion is Gadamer's explication of prejudice as human understanding. For Gadamer, all knowledge consists of prejudice, or pre-judgement. Prejudice is deeply embedded in historical consciousness and can be thought of as a horizon influencing understanding. It refers to the vantage point from which we understand the world and describe the limitations, as well as the breadth, of our field of vision or thought resulting from cultural and social backgrounds. It is these background understandings that make up the prejudices that enable us to make sense of the world. For Gadamer, the person's history infuses and influences thinking and acting. Our horizon is shaped by the past (historical horizon) while being in constant movement with the present (Spence, 2005). Gadamer understood that working out the hermeneutic situation was required for the right horizon of inquiry. Inquiry using Gadamerian hermeneutics becomes dialogue and interpretation with the researcher considering social, cultural, and gender implications in a quest to understanding the lived moment. Gadamer is credited with helping to extend philosophical hermeneutics by stressing the importance of tradition, background, and history in our ways of understanding (Annells 1999).

Heideggerian Notions

Next, I outline the key phenomenological notions as developed by Heidegger and Gadamer that have guided my thinking and exploration of the phenomenon of neighbourhood participation. These are notions of Dasein, relationality, spatiality, corporeality, temporality, and materiality.

Dasein

Heidegger's name for human existence is Dasein ('being there" or simply "existence"). Heidegger preferred to use the term Dasein rather than human beings

because we already have too many theories in advance about what human being means (Harman, 2007). As this hermeneutic study is about the experience of being human when I refer to 'we' I am referring to human being. Dasein seeks to explicate what it means to be-in-the-world; how we find ourselves in relation to things in the world, in everydayness. For Heidegger, the only way of understanding factical life (human life) is to study it in its environment. Heidegger (1962/2008) advocated laying "bare a fundamental structure of *Dasein*" as being in the world by exploring 'average everydayness' (Heidegger, 1962/2008, p. 65). Being-in-the-world refers to the way human beings exist, act or are involved in the world (van Manen 2014).

In exploring Dasein's fundamental structure of Being , that is, being-in-the-world, Heidegger (1962/2008) highlighted it as unitary and "must be seen as a whole" (p. 79). We are familiar with experiencing 'things' as discrete entities (objects and subjects) considered in relation to other things. For example, we experience neighbours as the people who live next door. However, what of the world of neighbours (things) in relation to the world of neighbourhood (thing) where this relationship begins? What things really are is events (Harman, 2007). It is human life in its environment where everything has meaning before we consciously notice it. Every time we discern a 'thing', it has a particular meaning because we discern it within a meaningful whole.

In the environment, all objects gain their meaning only in their relations with one another. Heidegger understands experience as situated within a meaningful world and experience brings this meaningful surrounding to awareness. In textual terms, this surrounding world can be thought of as the context (Quay, 2016). We experience the context (neighbourhood) as a whole, wherein every*thing* makes sense. Heidegger (Heidegger, 1962/2008) rejected the notion of the human being (subject) as a spectator of objects espousing that both are inseparable. He argued for the simple unity of the experience wherein I am one with the experience; experiencing the experience. The whole (e.g., neighbourhood participation) within which things (e.g., neighbours, streets, bus, shops) are experienced, involves redirecting the focus from things per se to the context, the whole, within which things appear.

These things are interpreted according to their significance with respect to other things in the world. Heidegger called this the 'facticity' of human life. Facticity is not something visible from the outside, it can only be seen or "interpreted in the very act or performance of living life, which always exceeds any of the properties the

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we can list about it" (Harman, 2007, p. 25). For Heidegger, philosophy is a way of making things present without making them present. "It does this by means of suggestions, hints, or allusion to the being of things that lies deeper than their presence to consciousness" (Harman, 2007, pp. 27-28). Heidegger understood that human life is always immersed in a specific situation, involved with its surroundings, in a very particular way that always remains partly obscure.

Wondering how neighbourhood participation is experienced and what it means to adults aged over 85 years is to understand what it means to 'Be' in the being and doing of participation when encountering neighbours and neighbourhood. Dasein indicates the mode of being. In its being, Dasein experiences the world through what phenomenological literature refers to as *existentials* of the lived world. Older adults' everyday neighbourhood participation is experienced through existentials of lived relation (relationality), lived space (spatiality), lived body (corporeality), lived time (temporality), lived things and technology (materiality). They are existentials in that they belong to everyone's life world; they are universal 'themes' of life (van Manen, 2014). They are 'equiprimordial'; that is, they are not separable from each other and equally involved in our disclosure of the world and ourselves (Wollan, 2003). With regard to the experience of older adults' neighbourhood participation I will outline how the existentials of relation, space, body, and thing will guide me in exploring the meaning structures of neighbourhood participation.

Relationality

To explore the relational aspects of neighbourhood participation is to ask how are people or things connected? The familiarity that draws residents to return to the neighbourhood is to consider neighbourhood as relations. How does the older adult (subject) experience the object (neighbourhood or neighbours)? For Heidegger (1962/2008), Dasein's Being-in-the-world is in relation to things in the everyday world. Neighbourhood participation is fundamentally a relational experience (etymology from Latin *participare* is to share) even though the older adult may not 'know' his or her neighbours or see them regularly. Although they may not be aware of each other in everyday life, they are present to each other even in their absence. "Being-in-the-world, the world is always the one I share with Others. The world of Dasein is a *with-world*" (Heidegger, 1962/2008, p. 155). Being-in-the-world of

neighbourhood is encountering the neighbourhood with neighbours present or it may be perceiving oneself alone in the neighbourhood. So what relationships do older adults have with their neighbours in their presence and their absence? How do they encounter each other in the world of neighbourhood? In order for Being-with to be an existential attribute is to understand that even Being-alone is Being-with (Heidegger, 1962/2008). It is Being-alone among others that helps us understand loneliness and being invisible to others.

Heidegger (1962/2008) posited that Dasein's being-in-the-world is "being with others". Dasein can be revealed through encounters with 'others'; these others being other Dasein (Horrigan-Kelly, Millar, & Dowling, 2016). Exploring "the self" with regard to average everydayness is through the interaction with others. Existentially being-in-the-world is Being-with and having concern for something. Without the relation of neighbourhood norms and expectations, neighbourhood participation could not exist. The older adult may experience an absence of relatedness to neighbours that is felt as not mattering or lack comfortable familiarity with things in the neighbourhood and experience displacement or not belonging. "Dasein finds 'itself' proximally in *what* it does, uses, expects, avoids-in those thing environmentally ready-to-hand with which it is proximally *concerned*" (Heidegger, 1962/2008, p. 155). Asking how neighbourhood participation is an experience of relation is to be aware that participating is always relational. Neighbourhood participation enhances a sense of belonging and not participating distances neighbourhood relatedness. Within everyday existence Dasein's existence is not one of "being alone" but of "with world" (Heidegger, 1962/2008, p. 152). It is the lived relation with others that provides meaningfulness and purpose (van Manen, 2014).

Spatility

Being-in-the-world refers to being 'there' in a location referred to by Heidegger as spatial situatedness (Mackey, 2005). The 'da' of Dasein is usually understood as 'being there' or 'in the world' and it is the taken for grantedness of space. Ontological spatiality is not so much the physical (ontic) spaces of the physical world but the meaning (ontological) spaces of our daily life that is Dasein's being-in-the-world. When we interact with physical space in an ordinary everyday way, we take for granted the objects and people that are 'ready to hand'. This is the pre-reflective state of encountering the world; an encountering that is without thought or effort.

The observable and measureable (the ontic) spaces of the physical world for example the space (height) between the footpath and the road, may go un-noticed by a physically able person. Ontologically this space is experienced as an everyday mode of being-in-the-world. On the other hand, a person of limited mobility might experience the same curb as 'high' and pause to think about how to take the step. Ontologically the space is experienced in a mode of fearfulness. Heidegger emphasised that space is not about measureable distance but about what is of concern or what "matters" to the person.

The structure of neighbourhood participation calls for a certain space experience that presumably affects older adults' ability to be who they are and to participate in the ways they wish. When the neighbourhood is experienced as uplifting or unsafe we understand the possibilities for participation. To be in the world in a state of concern is revealing of Being (Mackey, 2005). Lived space is felt space and can affect the way a person feels, such as feeling vulnerable, overwhelmed, or excited. How does the space shape neighbourhood participation and how does neighbourhood participation shape the space? Spatiality as a phenomenological existential in this study is concerned with the ontological aspects of interacting with things (including others) in the neighbourhood in an everyday mode of being.

Corporeality

The existential theme of corporeality may guide reflection on how the aged body is experienced with regard to neighbourhood participation. While we are bodily engaged in the world we do not really pay attention to the body. We are indifferent to our body until something makes us pay attention to it. Phenomenology highlights the lived experience of ageing and Merleau-Ponty's (1992) lived body. This is not the body one has but the body one is – the body through which one participates in the world and that emerges from the interactions between the physiological body and other forms of materiality it encounters. How do older adults experience the body when participating in their neighbourhood?

Temporality

For Heidegger, Dasein is temporal. Being aged is inherently temporal in nature, existing in an aged state. Ontologically Heidegger considered the person to be

temporally situated in the world, simultaneously in the past, present, and future. Life has a threefold temporal structure of past, future, present. How this is understood is that something is given ahead of time (e.g., a requirement for 80 year old drivers to be relicensed to drive), we take up a certain attitude toward what is given (e.g., fear of losing the driver's license), and "the intersection of these two poles gives us the shadowy and ambiguous present" (Harman, 2007, p. 30). Things are already there in our environment but are also interpreted by us 'as' being such and such (e.g., the older adult is concerned she will be seen 'as' too old to be driving). The combination of these two moments gives us the present (Harman, 2007).

Heidegger argued that we are constantly ahead of ourselves in anticipation of future events. Our focus is constantly changing, from dwelling in past memories to anticipating future events and we slip in and out of the present often before we have captured it. Our future is characterised by what he termed 'authentic' and 'inauthentic' possibility. Authentic possibility is most evident in the extreme, when we consider our mortality, but in the everydayness of life our natural mode of being is 'inauthentic'; which is to say we are always 'falling' away from our 'ownmost possibility for being" (Heidegger, 1962/2008, p. 158). Our natural mode of being is to 'fall' into the 'they-self', which is to conform to the attitudes, values, and behaviours of those around. How might what 'They' generally think, say, and believe to be neighbourhood participation influence the experience of older adults' neighbourhood participation?

Heidegger used the term *fallenness* of Dasein to refer to being absorbed in the things of the world unaware of its deeper meanings. To understand older adults' neighbourhood participation is reflect on what it is the older adults perceive and receive of their involvement in the neighbourhood. It is through mood that we primarily discover and understand ourselves, the world and other people; not the mental or feeling moods but 'a given mood' that is not of our choosing because it is something we already always are as 'thrown' into the world (Wollan, 2003). Even though all sensing and understanding return to mood, this is not a mental condition that comes from a place within, neither is it related to the external physical surroundings, but is connected with Being-in-the-World. The experience of older adults' neighbourhood participation may be temporally-bound rather than being bound to a particular calendar age. The lived experience of neighbourhood

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participation may have its ownmost temporal nature that lets us glimpse something of itself.

Materiality

The existential of materiality might guide reflection on how things are experienced with relation to the phenomenon (van Manen, 2014). Heidegger introduced the notion of 'equipment' to distinguish entities that Dasein encounters in the world from mere things. Heidegger distinguished relations as: "things that are relationally "ready to hand" such as tools or equipment and things that are relationally "present at hand" as objects of contemplation or reflection" (van Manen, 2014, p. 108). The difference lies in the pre-reflective state of using a thing in a taken-for-granted everyday manner (ontological) versus thinking about a thing when we are struck by the presence of such things (ontic). For example, an older person may take for granted that he/she walks to the bus and takes the bus to the shops. In the mode of everyday life, 'things' that work when we need them to work, work as they are intended to work, are experienced in a mode of indifference. We use them without thought or effort and take them for granted. For example, if the bus arrives on time, 'kneels' to let the older adult readily enter and the bus driver waits until the passengers are seated, then the older person is indifferent to the bus. When the bus is unready-to-hand, that is, something does not 'work' as the older person anticipates, the deficient ways of using the bus as transport reveals what is of concern to the older person's neighbourhood participation. The moment breaks through the ordinariness because it tells us something novel and interesting about our use of things. In our encounter with things we experience the force they exert on and in our lives (van Manen, 2014).

Heidegger uses the broken tool analogy to convey the unobtrusiveness of performing the tasks we expect of them. Suddenly the tool's brokenness ruptures the taken-for-grantedness of the task and says something about how things are experienced as familiar or strange. When Heidegger speaks of tools breaking and "equipment" letting us down he refers not only to what we habitually use and take for granted but to the things (equipment) around us that are unnoticed but part of the mesh of things and events that make up what we experience as the world. According to Heidegger, every use of a thing represents a concrete understanding of something. Dasein's circumspective concern is the web of relationships that we understand by

way of their 'in-order-to' and 'for-sake-of-which' they are put to work in Dasein's projects. We might ask about older adults' walking 'in-order-to' or 'for-the-sake-of' as a way of reflecting on the relationship of neighbourhood walking and neighbourhood participation. Being-in-the-world through the experience of Dasein we are open to the world to the extent that we become part of the world's play (Ziarek, 2013). How are 'things' experienced and how do the experiences of things and world contribute to the meaning of neighbourhood participation shape older adults' experience of neighbourhood participation and how does experience shape the environment for older adult' participation?

Why hermeneutic phenomenology

Scientific truth is not determined by objective methods alone but at any given time is an expression of a consensus of scientific views. Objective, scientific methods for acquiring and judging knowledge, even though they are widely accepted and often effective ways to understand the nature of things, cannot logically be the only correct, or even best, methods. The discourse of everyday neighbourhood participation is so widely used and seemingly understood by people in their everyday life that it is taken-for-granted and, therefore, may appear to require no further study. Hermeneutic phenomenology provides the foundation to explore the complexity and meaning of a phenomenon and disclose something not before seen. Hermeneutic phenomenology was chosen as an appropriate approach for exploring lived experience of everyday neighbourhood participation of adults 85 years and older.

Both Heidegger and Gadamer offer philosophical notions to guide me toward an understanding of the phenomenon of older adults' experience of 'life world'. Lived through experiences of everyday participation are characterised by actions and reactions to their neighbourhood. It is the experience of attending to the world without thinking but instead breathing, moving, experiencing, and observing in the simultaneous perception of embodied awareness (Larsen & Johnson, 2012). Gadamerian hermeneutics has guided my way of working with the written text and reflecting on the text for interpretations and insights. Heideggerian phenomenology has guided an ontological understanding of the meaning of neighbourhood participation as a phenomenon that is taken for granted and thus has an assumed meaning not ordinarily questioned. The philosophical underpinnings have provided

the overall guidance to thinking and reflection on the meaning of neighbourhood participation.

Exploring the stories of older adults' participation presences them as already 'situated' or involved in the neighbourhood. Dasein was Heidegger's expression intended to designate the "openness" or situatedness through which Being appears. When we encounter a situation, our understanding is always through "attunement (how moods and embodiment disclose the world as already there, always thrown into a particular context) and understanding (the appropriation of possibilities for understanding being-in-the-world)" (Larsen & Johnson, 2012, p. 618). Dasein is disclosed in a happening that simultaneously opens up and closes off possibilities for experience, thought, and action. Disclosing the happening (experience) of the very things encountered by older adults in the everydayness of neighbourhood discloses the essence of participation through involvement in the world of neighbourhood. The meaning or essence of neighbourhood participation does not have to concern us as long we understand each other when we plan for older adults' participation. Then we should concentrate on these activities and not on their meaning. How are we to understand the usefulness of these plans without understanding older adults' lived experience of neighbourhood participation? If we are involved in public health or urban planning activities then we participate in the meaning of public health or urban neighbourhood planning as it manifests itself in discourses. These discourses affect how we think about and plan for older adults' participation. When we understand lived experience the text expresses what it means for the older adult to be-in-the-world of neighbourhood. Hermeneutic phenomenology seeks to expand the realm of the human experience, expand the realm of what counts as the empirical field and how we go about evidencing this through lived experience.

Summary

In this chapter, I have outlined the philosophical and methodological approach for this study. I have outlined some of the foundational phenomenological notions and their interpretations as I used them in coming to an understanding of the phenomenon of older adults' neighbourhood participation. I found the philosophical approach and the notions of hermeneutic philosophy have shaped my understandings about the phenomenon. They have given me a new way of looking at the world that does not have the answers, but lets me question, remain open to new possibilities, and move

closer to the essence of neighbourhood participation. I will now go on to summarise the key features of the method.

Chapter Four: Methods

Introduction

In this chapter, I will outline the process of doing this study and how I went about seeing the meaning within the text. Having chosen to use a hermeneutic phenomenological approach, I was aware of the need to hold close to its philosophical foundations throughout the study. Both Gadamer (2004/2013) and van Manen (1990) explained that a hermeneutic phenomenological approach has no specific method to direct a human science investigation. Contrary to the title of his magnus opus *Truth and Method*, Gadamer argued there is no method to truth. Human understanding cannot really be controlled through the use of a method or by means of rules (Gadamer, 2004/2013). There is no procedural hermeneutic method in Gadamer's work because method brings a narrowing of perspective and reflection (van Manen, 2014). Phenomenological research is a turning towards a phenomenon rather than following a research technique (Gadamer, 2004/2013). Nor is there a Heideggerian step by step method to guide the research study. This is not to say that hermeneutic phenomenology is a-methodic. The basic method of phenomenology involves "taking up a certain attitude and practicing a certain attentive awareness to the things of the world as we live them rather than as we conceptualise or theorize them" (van Manen et al., 2016). It is how the researcher attends, questions, and thinks "in and through evolving methods" (Crowther, Ironside, Spence, & Smythe, 2017). 'Doing' phenomenology is therefore a reflexive method and involves the practice of ontological 'reduction', going back to the world as lived, and attuning to what prevents us staying open to the text (van Manen, 2014).

This chapter will report the way in which the study has followed the ontological reduction as a mode of being and doing this hermeneutic phenomenological study. This mode will be captured under the familiar research notions of ethical approval, recruitment, interviewing, analysis, and finally, trustworthiness and rigour.

Ethical Approval

Ethics approval for the study was granted by the Auckland University of Technology Ethics Committee (AUTEC) (Appendix A: AUTEC approval letter). Approval was granted to recruit and interview up to 15 adults 85+ years as participants in this study.

Recruiting Participants: Inclusion Criteria

I used a purposive recruitment method informed by the research question. In order to gather rich stories of everyday neighbourhood experiences in advanced age I sought men and women aged over 85 years and physically able to get about the neighbourhood.

The aim was to have a range of perspectives of urban neighbourhood participation from both male and female older adults. The inclusion criteria for participation were:

- Aged 85 years or over;
- Able to participate in their neighbourhood;
- Able to recall and discuss recent life situations in English; and
- Living in urban Auckland city for 6 months or longer.

Urban Auckland was identified as the inner-city Auckland boundary as defined by Auckland Council District Plan. The boundary area is referred to as the Waitemata District.

The inclusion criteria were set to identify people who had experiences in the phenomenon of interest and who could draw on stories that would be rich in detail. Those living in an aged care facility (e.g., resthome or hospital) were excluded.

The study concerns adults aged 85 years and over, thus men and women of this age were sought. Purposeful sampling was used in the selection of participants who would be able to provide rich detailed stories to illuminate the phenomenon. This method of selecting research participants is to select for their match to the criteria that is determined by the purpose of the research (Morse, 2012).

Recruiting Participants: Recruitment Methods

Purposive recruitment was via advertisements (see Appendix B) placed in community newspapers and notices on noticeboards in areas frequented by older people such as the library, senior citizens' clubs, and general practitioner practices. Visual impairment was intentionally accommodated by using 14-point font for all written notices and information as recommended when undertaking gerontological research (Provencher, Mortenson, Tanguay-Garneau, Bélanger, & Dagenais, 2014). Initial recruitment efforts via advertisement and local newspaper articles were unsuccessful in attracting participants. This prompted me to apply for and gain

approval from AUTEC for an amendment to recruitment that included a mail drop. Approval was granted. The most effective recruitment approach was through a third party most often associated with aged persons' organisations or community programs such as Aged Concern, Grey Power, and community programs (e.g., an inner-city development program and a cooking for seniors' class and University of the Third Age).

I met with a key person within each of the organisations who subsequently acted as an intermediary, relaying research information to prospective participants. Once satisfied with the intent of the study they approached older members of the organisation, some worked for the organisation and others were users of their services. The organisational contact person either left my contact details with the prospective participant or gained their approval for me to make the initial contact. I was cognisant of being a stranger and appreciated that the intermediary, as a familiar and trusted person, potentially offered reassurance to the older adult that the study would be safe and comfortable. Going through an intermediary was an ethical and successful recruitment method. It appeared to give a number of the participants the necessary assurance to consider becoming involved in the study. I applaud this caution for both participant and researcher safety. Furthermore, the intermediary advised me on the preferred and optimal way of making the first contact (e.g., they do not use a phone so knock on the back door on an assigned day/time or allow a long phone ring time because they are slow to get to the phone).

The strategy of using a third party and advertisement was used to protect against the possibility of coercion. To ensure consent was gained from participants prior to the research they were provided with a copy of the purpose and expectations of the study. I provided my contact details for participants' inquiries and expressions of interest. Those interested either contacted me directly or through the third party who would provide the participant with a copy of the participant information sheet (see Appendix C). An initial phone discussion provided me with opportunity to determine participant eligibility and provide the potential participant with clarification and opportunity to agree/decline to participate in the study.

I made the initial contact for all but two of the participants and this was by phone. Two participants initiated the contact via email. Together we arranged an interview time and established their preferred location for the interview. All participants elected to be interviewed in their own home. All were offered an option

of having another person present at the interview; two participants had a family member attend.

Confidentiality

All participants were asked to select a pseudonym to maintain their anonymity. Those who chose a pseudonym quickly identified one and recounted poignant stories to explain their choice of name. Two chose the term of endearment used for them by their parent/s. Others declined using a pseudonym and preferred to be identified by their first name.

Consent

The nature and scope of the study was reiterated at the beginning of the interview and sufficient time allowed to respond to questions about the study before obtaining written consent (Appendix D: Informed consent form). No participants had sent written consent prior to our meeting for the interview. I secured the participant's signed consent in hard copy prior to commencing the interview/discussion and later stored it in a locked cupboard. I informed all participants they had the right to withdraw at any time. Nobody withdrew from the study.

The study participants

Fifteen people were recruited from within the Auckland inner city boundary of the Waitemata District. All consented to participate in the study; six men and nine women aged between 86-96 years (refer to Table 1, p. 80, for an overview of participants). All participants were living in their own home and neighbourhood, and all but three owned their own home. Of these three, two lived in social housing flats and were in the midst of a neighbourhood legal challenge fighting eviction due to local Council urban development changes.

Table 1: Participant profile

	Pseudonym	Age	Recruitment	Living circumstance	Type of dwelling
1	Eileen	89	Community contact referral	Widowed 30yrs, living alone	Housing New Zealand renting 20yrs
2	Oonah	88	Community contact referral	Widowed 5yrs, living alone	Family home 46yrs
3	Sisi	88	Community contact referral	Widowed 18mths, living alone	New home (same neighbourhood) 62 yrs
4	Gik	89	U3A contact referral	Married	Family home 65yrs
5	Jean	89	Referred by a participant	Widowed 30+ yrs, living alone	Family home 55yrs
6	Betty	86	Community contact referral	Widowed 8yrs Living alone	New apartment 5yrs (new neighbourhood)
7	Marj	88	Community worker referral	Single, living alone	Housing New Zealand renting 22yrs
8	Annie	89	U3A contact referral	Widowed, living alone	Family home 50+yrs
9	Jonah	89	Grey Power	Widowed, living alone	Family home 45yrs
10	Stephan	88	Community contact referral	Married	New home 5 yrs (new neighbourhood)
11	Ken	88	Age Concern	Married	Family home 62 yrs
12	Denys	85	Community contact referral	Married	Family home 50 yrs
13	Jess	91	Community worker	Single, living alone	Housing New Zealand renting 25yrs
14	Tessie	96	Age Concern	Widowed 74yrs, living alone	Family home 93yrs
15	Jack	92	Age Concern	Widowed 6yrs, living alone	Family home 70yrs

Phenomenological Interviewing

    Being reflexive

Reflexivity refers to modes of self-reflection, a tool to develop an attuned awareness of self and of researcher bias, throughout the process. The hermeneutic process of interpretation requires the researcher to pay attention to how her own pre-understandings may affect the questions asked, data collected, and its interpretation (Berger, 2015). Reflexivity affects every stage of the research process. Strategies such as pre-understanding interview and journaling helped me stay open to reflective thought throughout the research study. The basic idea of reflexivity is to return to the world as we lived in, in the natural attitude of the lifeworld. The natural attitude (ontic reduction) calls for the researcher to remain in the open and to abstain from theorising and conceptualising the phenomenon. The concept of reflexivity was referred to by Gadamer as 'fusion of horizons' where different vantage points come together. In an attempt to place myself in the open (the epoche) I kept in conversation with the data, literature and my supervisors.

    Prior to beginning this study, I had a pre-understandings interview with my supervisors to draw out my assumptions in relation to neighbourhood participation. In this conversation I recalled a short television documentary of a couple in advanced age who lived in an apartment in the main street of the Auckland city business district. To my surprise, they spoke glowingly of inner city living. When they went for walks, he spoke of the lively outdoors with people moving about and being on friendly terms with a number of the shop workers. Listening to this couple speak of their daily routines surfaced my assumptions that older adults preferred the quietness of suburban streets with green planting and open, sparsely populated spaces, and local activities and facilities to enjoy. I came to see how my experiences of community-based nursing experience in suburban areas influenced my perceptions of older adults. All of this I was bringing with me to this study. So began the journey of bringing my taken-for-granted assumptions about older adults' urban neighbourhood participation to the fore for my consideration as I worked with the data.

    From early on in the research process I began keeping a journal of conversations, teaching notes, quotations, and thoughts on the phenomenon. Throughout, I maintained a reflective journal that made explicit my biases, assumptions, and questions in relation to the phenomenon. Although not a daily

record, I dated entries of my thoughts, observations, and wonderings as I worked with the stories. I wrote down things I noticed during the interviews and thoughts that occurred shortly afterwards. These reflexive accounts informed the analysis and were used as contextual background for the data. Researchers using this approach attune in a way that opens and invites them to work with data in emergent ways (Crowther et al., 2017). The documenting process helped to capture insights and make them available for ongoing phenomenological reflection on the meanings of everyday neighbourhood participation. As a process it enables a fusion of horizons; that my horizons as a researcher fuse with the horizon of the literature, and the horizon of the data (Koch, 1996).

The interview as a conversation

The data were gathered by way of in-depth, individual research conversations taking between one to two hours; averaging one and a half hours. At the first sign of fatigue, for example, losing concentration or a slowing pace, or after one hour of conversational interview, participants were given the option of concluding the interview. The vast majority of participants commented they were enjoying the 'conversation' and wished to continue. A phenomenological approach is semi-structured with pre-thought out questions to invite conversation about topics (see Appendix F: Indicative interview questions). I used these to guide but not direct the course of the conversation.

In accordance with the methodology, the style of 'interview' for gathering material (memories of experiences) for older adults was intentionally conversational. Being in the participant's home seemed to make for a relaxed mood. The interview would begin with social talk, and sometimes a cup of tea that opened a way of easing into the research interview. I found participants eager to talk and the interview quickly became conversational. I saw my role to be both *in* the conversation with the participant as he/she told past events and particular stories while ensuring the description in the story was as detailed as possible . A particular difficulty with the conversational style of interviews was how participants preferred to talk about situations, giving their opinions and interpretation of events, rather than telling them as an account or description of moments of lived experience. van Manen (2014) made the point that "it is extremely difficult to get interviewees to actually tell an experiential account in

pre-reflective terms" (p. 315), that is not their perceptions, views, opinions, or interpretations. The questioning and then questioning again helped to surface experiences. To do this I remained open to explore ideas that emerged while holding a clear sense of what the conversation was about. I had explained that I would do very little talking but found I was steering the conversation back to recent events as many times the account of an event would slip into reminiscing the past.

The primary aim of the phenomenological interview is to gather experiential narrative stories or anecdotes that are the data for phenomenological reflection on the phenomenon (van Manen, 2014). Thus, I assumed neighbourhood participation would be illuminated through stories about the every day. I asked open-ended questions that would enable a description and usually began with a question that provided the context for their everyday participation such as, "what can you tell me about your neighbourhood?" The next question invariably invited them to tell about the most recent events or moments of participating in the neighbourhood, such as: recall and describe the last time you were out and about in the neighbourhood. The following question I would ask would be; can you tell me about a particular moment or event of that day? I used open questions to create space for the person to respond in his/her own way and let the story flow. Participants wondered aloud whether or not their everyday was sufficiently interesting and required encouragement to continue with more open questioning, "Then what happened?" Frequently accounts moved back and forth in time as one experience triggered a memory of another. The interview style allowed for backtracking and clarification within experiences while orientating questions to bring the conversation back to the present. Inviting conversation about the phenomenon, such as "tell me about a time when you last enjoyed being in your neighbourhood?" was used to encourage talk around specific events (see Appendix F: Indicative Interview Questions).

Lived experience is the pre-reflective awareness of life that cannot be grasped in the midst of the living experience, only reflectively after the event (van Manen, 1990). Having participants describe a particular event or experience as they have lived through it, what they did and felt, and what others around did, helped me gain detailed descriptions of participating in the neighbourhood. Naturally, the lived moment was a recollection, a reflection, of the experience as it was lived in the past day, week, month, and could never be an accurate reflection. Scope exists

for eliciting participants' interpretation of things within the conversation, for example "tell me what you think this means for being an older resident in the neighbourhood?"

I kept the interview dialogue open and encouraged participants to tell their stories as they wished. My interviewing improved with time as I learned to trust the process. In earlier interviews, my concern for detailed stories drew me to interrupt for more detail or to convey surprise in a manner that was intended to encourage continued talking. I recognised this tension between maintaining a non-judgemental approach and engaging in the conversation and was conscious of this in all interviews. With subsequent interviews, I began to recognise similarities and differences in neighbourhood experiences and this familiarity helped me to listen more deeply for the person in the story. I ventured to use what I gleaned to gently guide them while allowing the story to unfold as the participant wanted. For example, a participant had been telling of wanting to buy a piece of office furniture and using the internet to locate it. To elicit his story of finding his way to the shop that was in an unfamiliar part of town I drew on an understanding of him as an adventurer gleaned from his earlier stories and asked, "as an adventurer, tell me about finding your way?" I was rewarded with an animated and detailed description that required no prompting from me, of how he found his way to the shop, the difficulties experienced in driving in the busy traffic, parking, and then finding his way around the shop. Furthermore, he segued into yet another story, thus improving the flow of the interview.

Data security

In preparation for the interview, I planned for participant anonymity and data security. I carried the plan out in the following ways. The interview transcripts were recorded digitally and a master copy stored electronically on a password protected computer at work. Each digital copy of the interviews was identified by the pseudonym or first name and date only. Digital recordings and original transcripts were assigned a code and kept on a password protected hard drive during data collection and data analysis and afterwards held in locked storage in my office. After six years, I will destroy the data. Wherever identifying names of others or places were referred to during the interview, these were removed from the transcript and first name/pseudonyms applied. A professional transcriber transcribed each interview

verbatim. They signed a transcriber confidentiality agreement (see Appendix E) that was securely filed with participant consent forms. I erased interview recordings from the digital recorder once the transcription was complete and the story written.

Analysis: Working with the Data

Hermeneutic phenomenology recognises there are many ways of working with data. "Analysis begins with and continues alongside data collection; one informs the other" (Wright-St Clair, 2015, p. 60). There is no one way of doing phenomenological research; rather, it is a way of being-phenomenological that 'comes' (Smythe et al., 2008). It involves adopting an attitude that ponders unfolding and evolving questions (van Manen, 2014), an open and questioning stance when working with the data.

Crafting stories from transcription data

In hermeneutic phenomenology, excerpts taken from verbatim interview data are known as anecdotes or stories, rich in meaningful data. Storytelling recognises the person as a "self-authoring whole" whose lived experiences are both ordinary and mysterious (Wright-St Clair, Grant, & Smythe, 2014, p. 132). The researcher's task is to "draw out the lived experience anecdotes" from the interview transcripts (Wright-St Clair, 2015, p. 60) in a process referred to as "crafting" (Caelli, 2001). Crafting or deriving stories is supported by the philosophical underpinnings of this methodology and its purpose (Caelli, 2001). Using Caelli's method of crafting stories involves two distinct but associated elements. The first is the method of 'how to' craft stories in the practical or ontical sense and the other distinct but associated element is the ontological 'attunement to' the crafting (Crowther et al., 2017). Both activities are integral to data gathering and interpretive analysis of the data.

I began by reading each transcription while listening to the audio recording; listening and reading both for transcription accuracy and what was not said by the participant (e.g., use of tonal inflection and pauses). The process of dwelling in the data, listening and reading/re-reading the transcript data gave me a naïve sense of the data. I listened for anecdotes to emerge that I could 'craft' into coherent and compelling stories of the lived experience.

Attuning to the text for anecdotes of lived experience involved working with the chaos of the text. Out of the 'messiness' of the transcript, anecdotes began to emerge. I constructed coherent anecdotal stories that involved deleting the questions,

prompts or clarifying statements, tidying grammatical structure, removing textual repetition and creating a coherent flow while using participant's own words as far as possible and keeping the essence of meaning intact (Caelli, 2001). Through the analysis of stories, it is possible to construct an account that gives voice to and captures the essence of particular aspects of the phenomenon (Wright-St Clair et al., 2014). In the early stages, I came to recognise some stories were more description of an event rather than the lived experience of the event. This insight informed my ongoing interviews for greater focus on descriptions of what happened. From each participant's transcript I crafted a number of 'stories', between 10 and 20, that formed the descriptive data for ongoing analysis.

The stories were returned to the participants, although this is not methodologically essential. On a matter of validity, the notion of member checking is questionable in hermeneutic phenomenology because stories are constantly changing from initial telling due to personal and social situations (Crowther et al., 2017). As hermeneutic researchers, we assume that the story shared by a participant is an account of their experience. We also understand that the participant will choose how to "appear" in the story and thus the researcher will never know the thinking of the participant (Crowther et al., 2017). The "orientation in hermeneutics is not on determining a hierarchy of truths; one version of the truth is not understood as more significant than another" (p. 828). Yet, I was concerned to establish the anecdotes resonated with their experiences. Accordingly, I collated the 10-20 anecdotes drawn from each participant's transcript into a spiral-bound booklet for each participant to keep. The reading of their stories provided participants opportunity to ensure accuracy and completeness. Having participant support for the stories is helpful when there is agreement about felt meanings of the phenomenon being studied (Zambas, 2016). However, validating the quality of the experiential anecdotes does not validate the quality of the study as a whole (van Manen, 2014). On a personal level, returning the stories was my way of acknowledging that these stories belonged to the participants in the first instance and giving them opportunity to see what it is they were gifting to this study.

The compelling nature and evocative power of stories became apparent as the participants read through their stories. The first participant to receive his stories immediately responded to the image on the front page. I had anticipated the image might personalise the presentation of participants' stories. I was also cognisant of the

possibility I might 'get it wrong' and decided that personalising the collection in this way was worth taking the risk. He strongly rejected the photo of the "old man", which led him to identify further inaccuracies within the image. The value of my getting it wrong lay in the conversation that opened me to deeper understandings and insights into this person and his stories. Importantly, I gained insight into my own pre-conceptions of ageing. I came to recognise a distinction between 'being old' and 'being aged', a distinction made by Wright-St Clair, Kerse, and Smythe (2011) in earlier research. His subsequent response, to offer a photo as replacement, acted as a catalyst for me to invite future participants the opportunity to provide a photo for this purpose. I could not be confident that other participants would offer rich insights should I get their image wrong. Some accepted and commented to the effect that the photo personalised the presentation, making it feel like 'my book'.

The responses by participants to their own stories showed the significance of this process of validation. A published author himself, one participant noted the occasional inaccurate detail and added "but it doesn't matter to the story. This is perfect. You've captured things perfectly". Only minor edits were made by a few participants and were mostly related to the chronology of an event. A number commented that the story had captured what they were saying better than they recalled telling it. Many commented they intended sharing these with family, as they had not previously talked of these everyday events. All participants lingered over each story and would comment, or occasionally provide interpretation. Often they would offer new experiences triggered by the story they were reading. One participant, while reading a story I had thought to be very funny, was moved to tears. When he was ready to speak, he slowly raised his head and in a faltering voice said, "all I see here is my own loneliness". Returning his stories and hearing his insights opened me to new understandings of his experience of everyday life. Furthermore, it contributed to my learning about open listening. Returning to his stories I could see and hear loneliness where previously I had not.

Stories crafted in hermeneutic phenomenology are a provocative and powerful means of evoking shared pathic responses (van Manen, 2014). Its "truthfulness" becomes known to us by "how it resonates in felt, shared plausible meaning, and this resonance cannot be reified into proof" (Crowther et al., 2017, p. 2). Such was their engagement in the telling of their everyday events, some participants continued the conversation by emailing or phoning to update or recount

an event they considered important to the study. In this way the research conversation continued beyond the interview. All participants gave approval for their stories to be used in this study.

Interpreting the data

I would like to be able to say that I began the analytic process in an orderly fashion. Becoming-phenomenological was anything but smooth and systematic. When I first read the transcript, my thinking was relatively superficial. Something would jump out at me as important and I would write about it. On reading over what I'd written, I would see that it was more descriptive than interpretive but nevertheless, it showed me what was initially noticeable. The reflexivity of going back and forth between thinking, writing, and reading; and going back and forth between one interview and another interview is how the thinking happened. The circling process of interpretive thinking was at times uncomfortable and frustrating. I was being encouraged to dwell in, stay open to and 'listen' to the stories when I did not know what I was listening for. There were no steps to follow so how would I know if I was on the right path?

van Manen (2014) suggested, the researcher "can aim and aspire to cultivate his or her inquiry program and practice by attentively attending to Heidegger's thinking" (p. 231). The method must embrace Heidegger's understanding of Dasein as being-there, being-open, and awaiting the moment of understanding (Smythe et al., 2008). The ontological way to understanding the human lived experience is thinking. It involves a "journey of thinking" (Smythe et al., 2008, p. 1390). Contrary to positivistic thinking as a mode of working something out, ontological thinking is letting it come to understanding which is "always/already drawn from all of my experiences and conversations (via reading, writing, thinking and dialogue) with others" (Smythe et al., 2008, p. 1391). Thus coming to understanding is not following a set of pre-determined steps or processes but experiencing openings (the epoche) where the originary meaning of the phenomenon is revealed through a journey of thinking.

Heidegger (1962/2008) referred to following certain paths of thinking towards a clearing where the "as yet unthought" occurs, revealing something of the phenomenon. van Manen (1990) asserted the "paths (methods) cannot be determined by fixed signposts…they need to be discovered…in response to the question" (p. 29). Method choices become clearer as meanings and insights emerge from the data.

Turning to the phenomenon

In the first instance, I read each story for what was significant to the phenomenon of neighbourhood participation. I wanted to find what meaning I could take from the older adult's experiential story that would inform understanding of neighbourhood participation. This is when thinking through writing comes into its own. Understanding that "writing begets thinking" (Wright-St Clair, 2015, p. 62), I began writing my way towards meaning. I wrote about a story, using the text and participant's words. I understood that I brought my own history and pre-understanding into the interpretive process, this is inevitable, but I was conscious that the interpretations must stay focused on the text itself. Entering the *phenomenological attitude* throughout the interviews and while working with the data, I was mindful of freeing myself of the disciplinary and professional perspectives of older adults' participation. The "phenomenological attitude is free of value judgements from an external frame of reference…and instead focuses on the meaning of the situation purely as it is given in the participants' experience" (Wertz et al., 2011, p. 172). Dwelling in the text, and staying close to it, involved a process of reading each sentence, listening to the words/phrases used, listening to the silences, making notes of the participant's activities, noting impressions of what each story was saying, all of which led me to deepening impressions of textual meaning. I noted questions as they arose in the reading, thinking process. I read and re-read the stories for meaning and used basic mind-mapping to capture what I sensed mattered within and across the stories.

The value of the well-crafted phenomenological story is its ability "to reveal ways of being, thinking and acting in the world that shed light on what is known but covered over, or forgotten…and in the sharing reveals more of our shared understanding of being human" (Crowther et al., 2017, p. 2). Writing in an experiential way is capturing the a-theoretic, it concerns the living dimensions of our existence. The phenomenological reflective method is difficult to explicate because we are so used to objectifying things. As soon as we think, reflect, we name the phenomenon a 'thing' (van Manen, 2014). We make a concept of, for example, 'neighbourhood participation'; rather than understanding it as an event. Phenomenology tries not to objectify but to describe the living moment of the experience. Heidegger's hermeneutic method is not objectifying, theoretical reflection but reflection that "ponders, muses, contemplates on the meaning of things

and on the how of meaning… through "understanding" of the moment" (van Manen, 2016, p. 6) – not to make experience into a thing or an object, but understanding something as a living moment in its livingness. Nevertheless the reflection captures what stood out about the event for the participant.

Essential notions

The process of data gathering and interpreting continued until the whole research text was assembled. Looking across participants' stories, drawing on the philosophies of Heidegger and Gadamer, and in discussion with my supervisors a number of thematic understandings emerged from the data. The process of discovering meaning and formulating it as a thematic understanding is simply a means to get at the notion being addressed (van Manen, 1990) and not a rule-bound process or an experience of objectifying content. Rather, it is pointing the reader towards something that is seen or heard in the text, that matters significantly; a notion. Phenomenological notions or themes are abstractions of the interpretive descriptions and are not intended to be generalisable. Rather, they are presented as new understandings that the researcher wishes to point the reader towards for further thinking (Smythe et al., 2008). What follows is an extract from an interpretation of Jonah's story in which he tells of picking up bottle lids found discarded along his walking route. During the writing, meanings emerged.

Example of text interpretation

Being helpful

An old fellow talked me into collecting tabs from soft drink cans for the children's hospital. I pick up cans when I'm on my walk and tear off the tabs. I carry the cans with me until I find the next recycling bin and dump them into it. Yesterday I was coming home with a tab in my hand and a lady in the street smiled and said 'hello'. I didn't know her but she must have noticed me picking up cans because she offered to put the can in her recycling bin. Sometimes it's embarrassing and people will ask "what did you pick up?" I tell them. I don't mind if they laugh and think I'm an old codger. I'm removing them from the street and helping the kids' hospital. (Jonah, 89)

Initial Analysis

When he is out on his everyday walks Jonah *likes* that he is doing something more than merely going for a walk. Being there means Jonah is opened up to possibilities of *helping* others in his day. Being 'there' is not the place itself, in a spatial sense, but the "the space it opens up and illuminates" (Inwood, 1999, p. 42). Collecting discarded drink cans lying on the street lets Jonah be involved in his neighbourhood. More than picking up litter for the sake of a tidy neighbourhood environment, he finds himself involved in a greater cause. Concerned for the future of the environment he searches for a recycling bin, not just any convenient rubbish bin, to dispose of the rubbish. In a mode of purposefulness Jonah finds a greater use for 'rubbish' by removing the tear-tab from the can, contributing toward a community fundraising activity. The pleasure he receives from contributing is knowing he is *doing something* for others and he *likes that*. Sensing his contribution as worthwhile shows itself as taking pleasure; not just in the thing he does but the thingness of the doing is worthiness. He understands that what he is doing is worthwhile and he, himself is a worthy person of the neighbourhood.

Interpreting the meaning

The meanings within the data as a whole were interpreted through the hermeneutic circle method of engaging interpretively and moving between the whole text and the stories within it. Immersed in the research experience, I came to understanding what is being revealed about the phenomenon through the circling discipline of reading, writing, talking, mulling, re-reading, re-rewriting, and keeping new insights in play (Smythe et al., 2008; van Manen, 2014). When I listened to participants tell of their experiences I appreciated it was their understanding of their experience and I acknowledged that the whole story would never be told or heard. In other words, the story will never reveal all there is to know about a phenomenon; yet I take from it insights that matter. It was through writing and rewriting that my understandings slowly emerged. In hermeneutic analysis, there is no final interpretation because with each re-reading there are new insights (Zambas, 2016). Eventually I had to trust that I had identified essential messages in the data. The quest of Heideggerian phenomenology is not to provide answers but rather to invite readers to be exposed to the thinking of the author and "to listen to the call on their own thinking. The

'call' to thinking is the already-there mood that holds us to thinking (or not thinking) toward understanding" (Heidegger, 1962/2008, p. 175). I offer these notional themes as a call to the reader to join the dialogue within his or her own thinking. These will be explored in three findings chapters.

Trustworthiness and Rigour

When there is no predefined method to follow, no rules to be adhered to, then the question of trustworthiness can be questionable. Rigour is often privileged in positivist research but there is no consensus on qualitative rigour. The traditional conception of methodological rigour in qualitative analysis originated from the work of Lincoln and Guba (1985). Theoretical frameworks and methodological approaches to data analysis are widely varied in qualitative research, and for this reason it is difficult to apply a set of criteria for qualitative rigour (De Chesnay, 2014). The goal of interpretive phenomenology is an increased understanding of the multiple interpretations of the human experience (van Manen, 2016). Therefore, Smythe et al. (2008) argued that in Heideggerian phenomenology what matters for rigour

> is not accuracy in the sense of reliability, or how the researcher came to make certain statements; what matters is what has held the thinking of the researcher and in turn holds the thinking of the reader; what calls, what provokes them to wonder. (p. 1393)

The trustworthiness of insights lie in the conversation between data, philosophical notions, and openness to the text. A text never has only one meaning; however, all possible interpretations are not equally probable to me as the interpreter. No one telling or listening of a story will ever illuminate the whole of what there is to be known about the phenomenon nor could it claim to be the 'truth'; yet we take from it insights that matter. "We avoid thinking both that we have the whole truth and that there is no truth to find" (van Manen, 2017, p. 151). I did not expect to find a fundamental truth; rather I searched for possible meanings disclosed in a continuous process with the text. The story is considered to have done its work when we "encounter ourselves" pathically in the reading or listening. As Gadamer explained, we are interpreting and making the story our own; always and already understanding and recognising ourselves within it (Crowther et al., 2017). In other words, it is left to the thoughtful reader to decide on the accuracy of the phenomenological description.

Strategies used to enhance the validity of quantitative research serve to reduce and eliminate researcher values and biases. However, the findings of interpretive phenomenological studies are not neutral and value-free (De Chesnay, 2014; Morse, 2012). Earlier in this methods chapter I discussed strategies of reflexivity as a tool for managing personal bias within this hermeneutic phenomenological study. Annells (1999) offered a useful framework for me to determine trustworthiness in this study:

First, evaluating whether the study is 'understandable and appreciable' as evidenced in the language used; that it is clear and easily understood and fits with the methodology. I have sought to capture stories that engage with the phenomenon while remaining close to the participants' experiences and keeping them to the fore of the analysis. Ultimately, the reader will judge whether the language is easy to understand and whether or not their interest is captured.

Secondly, the research needs to be useful to public health and urban planning practice. Although interpretive phenomenology is not applied research, it should potentially have use for practice. The findings of this study point to a way of thinking about older adults when planning neighbourhoods for their continued participation. Further, the findings have relevance for nursing practice, which involves listening to the older person's experience in order to understand how nursing care might support and enable the older person's participation.

Thirdly, the research approach taken is congruent with the question. The aim of this research study was to explore and gain insights into what it means for older adults to be participating in the everydayness of neighbourhood. Gadamerian hermeneutics and Heideggerian phenomenology are both appropriate approaches to understanding what it means for the older adult to be participating in the everydayness of neighbourhood.

The issue of data saturation is related to trustworthiness in qualitative research, and is based on the idea that once the responses (interview or written texts) to a research question are saturated and no longer yield anything new then the need to pursue the qualitative meaning ceases. While important for all other forms of qualitative research the practice of saturating the data does not make sense when doing phenomenology. Phenomenological understanding is not a matter of "filling up some kind of qualitative container until it is full or of excavating a data site of meaning until there is nothing left to excavate" (van Manen et al., 2016, p. 5). It is

not possible to say that all the meaning of a phenomenon is caught or that the interpretation is complete. As van Manen (2016) asserted, a phenomenological inquiry can always be taken up again and explored for aspects of meaning; hence, there is no saturation point in phenomenological meaning (van Manen, 2016). Phenomenology studies are not a matter of looking for the same kind of content – looking again and again for certain words until there is nothing new to be seen. In phenomenological inquiry, "you open up a question, which becomes bottomless – it is not possible to capture all the meaning or meaningfulness of a human phenomenon" (van Manen et al., 2016, p. 5).

Conclusion

In this chapter I have laid out the methods used in this hermeneutic phenomenological study, and shown how they were underpinned by the philosophy and the inquiry processes. There is no one right way but I have attempted to show how the philosophical underpinnings of Heidegger and Gadamer guided the research methods. "The doing of interpretive phenomenology is as much to do with becoming a phenomenologist as it is to do with doing phenomenology" (Wright-St Clair, 2015, p. 67). In this case, it means 'knowing' the phenomenon to be studied, gathering and crafting stories of older adults' everyday lived experiences and following an iterative, circling process of reading, writing, rereading, and rewriting as a way of laying out my thinking towards an understanding of the phenomenon. Becoming a phenomenologist meant developing trust to stay immersed in the data until understanding emerged. It meant accepting uncertainty and accepting that my understanding might not be how it is. Interpretive phenomenology has alignment with public health and nursing and offers a way of informing practice in these health disciplines. Furthermore, it offers a way of doing urban planning research for insights into planning practice.

The older adults in this study described a number of everyday experiences of participating in the neighbourhood. The following three findings chapters capture my interpretations of what neighbourhood participation means for adults in advanced older age. What showed through as meanings of older adults' neighbourhood participation in the everyday will be clustered around three notional themes, one per chapter: *Holding on to the everyday as participating; Being neighbourly as participating; Keeping going as participating*. I have structured each of the findings

chapters by defining the notion within the context of this study and indicating how it fits with the philosophy, and presenting coherent, highly illustrative stories drawn from the texts, then giving an interpretation of what the story says.

Chapter Five: Holding-on to the Everyday as Participating

Introduction

This, the first of three findings chapters, shows participating as holding-on to the everyday. As previously discussed, in chapter one, being in the neighbourhood can be observed or measured in an ontic way that includes a range of neighbourhood activities the older adult involves themselves with. In much the same way, the measurable features of the neighbourhood environment let (or not) older adults participate in certain observable ways. The ontic knowing of neighbourhood participation shows us the beings (things) of the neighbourhood. Focusing on the phenomenological meaning, neighbourhood participation appeared as something more than the older adult as subject experiencing neighbourhood things (objects and people) as this or that. Phenomenally, this kind of knowledge shows us that 'holding-on to the everyday' is a mode of participating in neighbourhood.

Heidegger's ontological notion of Being-in-the-world is to understand that the way human beings are in the everyday is 'dwelling'. Ontologically, Being-in-the-world is not the spatial sense of I am here or there; rather, it is the way in which I am 'in' the world. Heidegger (1971) understands that "the manner in which we humans *are* on the earth, is *buan*, dwelling" (p. 349). What Heidegger invokes in this statement is the acts that "attain to dwelling"; those that build a life, a sense of belonging to a place, a way of life. In essence it is building a life where we are 'at-home' in the world; a world that we build and maintain. The act of building that life has the character of everyday familiarity, of comfort. We inhabit our world in 'habitual' ways that are "'being' there in an everyday manner" (Heidegger, 1962/2008, p. 171). Drawing on Heidegger's notion of dwelling, I will explore the essential ways in which these participants' stories can be read as dwelling in the everyday and as dwelling in the world of neighbourhood. Accordingly, this first notional theme of neighbourhood participation *as* 'holding-on to the everyday' appears as a mode of everyday being in the neighbourhood. This theme will be presented in four subthemes; 'holding-on to familiar ways', 'being busy', 'holding with routines', and 'holding the past'.

Holding-on to Familiar Ways

Continuing to do the ordinary everyday things, responding to the usual (and sometimes unusual) things when in the neighbourhood is holding-on to familiar ways. Holding-on to familiar ways is not participating; rather it has a semblance of participating, thus shows itself *as* participating. The following four stories each show us something different about participating in familiar ways, which reveal meanings for neighbourhood participation.

Annie speaks of what she usually does on her walk. Her story touches on being immersed in the beauty of the flora and fauna in a mode of comfortable familiarity in her neighbourhood.

> *On Tuesday, I was going to my craft group meeting. I catch the 9.30am bus, which is good because it means I avoid the busy time. It is about a 10 minute walk and I leave plenty of time to get there. I enjoy looking around at what's growing in people's gardens. I'm looking forward to the cherry blossoms which should be out soon. When it's in blossom I just have to stop and drink it in. I couldn't hear the tui [native bird] but I stopped anyway. I always stop in front of its tree to look for him. He wasn't there. I arrived at the bus stop in plenty of time to just sit and enjoy looking around.* (Annie, 89)

Accustomed to taking her time Annie allows plenty of time to enjoy the neighbourhood planting. She experiences time as plentiful, putting her at ease to *enjoy* walking in the neighbourhood. Anticipating the trees and gardens that are ordinarily growing alongside the streets shows her enjoying them in advance of setting forth on her walk. Even when she is not aware of looking around she is familiar with what is usually growing and flowering and this is comforting. *Looking around* Annie is connecting and reconnecting with what was there yesterday. Noticing what is there, she is being-involved-with as a way of being-in the neighbourhood.

The temporality of nature is closely related to our world time. Noticing the blossoms, Annie connects to the neighbourhood through the rhythms of its natural world. The seasonal changes mark time passing and reveal participation as noticing; noticing what is normally there shows how she participates. More than what she sees on this occasion, it is the comfort of being amidst the familiarity of nature's seasonal patterns and beauty. From a Heideggerian perspective the neighbourhood can be seen as the gathering of the fourfold, the sky and earth, divinities and mortals into a

simple oneness. That is to say, Annie has a sense of herself being at one with things of nature. Holding on to the familiarity of things in their familiar place lets her be at one with the neighbourhood.

Accustomed to hearing the song of the tui, a native bird, today she notices the silence. This is not to say the street is silent but she hears the absence of the tui song as silence. The missing sound makes the tui noticeable in its absence. Sensing that all is not as it should be, Annie is thrown to noticing the tree in *its* silence. Standing in front of *it's* tree, she beholds it. In 'discovering' the tree, she encounters its nature. As the 'environment' is discovered, the 'Nature' thus discovered is encountered too" (Heidegger, 1962/2008, p. 100). Annie talks of *drinking it in* as though drawing life sustenance from the tree. More than the tree, it is the nature of the tree that stirs and enthrals Annie, such that she experiences oneness with it. Turning to ontological philosophy, Heidegger (1962/2008) referred to this way of being in the world by way of being in a 'mood'. He argued that in its everyday moods Dasein is disposed and attuned towards things and circumstances within the world. Attuned to what is naturally there sustains and uplifts Annie. The tree symbolises the extraordinariness of being there doing what it ordinarily does; living. The comfortable familiarity of its thereness is revealed as life-giving. Being aged and toward the end of her life, Annie possibly intuits the gift of each day. As the roots nourish and hold the tree in place, so too holding on to familiar everyday ways of being in the neighbourhood sustains everyday life.

Betty tells of noticing what others might not notice as a mode of participating in the everyday.

> *I'm not a great walker but I took the dog for a walk to Victoria Park this morning. It's only 5 minutes or so down the road. Really, it's so close and convenient. When I got to the park today, I just wanted to sit so that's what I did. I'd been for a big walk yesterday at my favourite park – there are so many pathways there. Today, I just sat quietly under the lovely big trees while the dog ran around. It was lovely. I watched some young children having fun on the playground. It must have been too early for the bigger kids because they weren't at the skate park this morning. But I did see my neighbour skateboarding there.* (Betty, 89)

At the park, Betty is comfortable under the shade of a tree, *quietly* sitting *watching* not only her dog but also other people in the park doing what it is they are

doing. Comfortably seated, she lingers a while, simply watching the park's activities. This seat, under shade in the park invites dwelling. Sitting and watching are ways of dwelling in the neighbourhood. An ontological view of being is the dwelling place. Interpreted here, it is more than the physical seat that invites dwelling but it is the mood of noticing and holding the comfortable familiar ways of the neighbourhood. Betty notices the ordinary rhythms and patterns of the neighbourhood; the children using the park, a man she recognises as a neighbour, who is there and who is absent today. Betty notices things that others might look past. Quietly amidst the park's activities, she is open to enjoy what is there for her to watch. Watching and noticing is how she usually involves herself; an involvement that frees to her be-with the ordinariness of the everyday. We glimpse Betty dwelling with the familiarity of the neighbourhood as a mode of holding on to its everyday ways.

Jess tells of the importance of holding on to everyday boundaries in order to maintain comfortable neighbour relations.

> *I was at the letterbox chatting with one of my neighbours. Nice woman. We were just chatting about the HOP card thingy. She was asking me how I got mine. I told her it was a hassle getting it but I've no trouble using it. After we'd chatted a bit she asked me to into her flat for a wee cup of tea. She's never asked me in before. I don't like to be rude but I don't visit my neighbours and I don't invite them into mine. I don't think of them as my friends if you know what I mean. I know most of them and I'm friendly when I see them. Perhaps I should have...* (Jess, 90)

Jess goes about her neighbourhood in a friendly manner suggesting she is open to the good nature of others. Encountering her neighbourhood in her usual mode of friendliness Jessie *chats*. The letterbox is a comfortable place to 'chat' and affords itself well to 'in passing' conversations with her neighbours. Chatting has a friendly demeanour to Jess' interactions with those living near-by. Understanding herself as a friendly person, she is comfortable chatting in the neighbourhood whenever the opportunity presents itself. In this way, Jess spontaneously interacts with her neighbours. Recalling the topic of conversation, suggests willingness to share local information as a mode of helping others. The importance of receiving needed information through others who can provide first-hand experience and feedback about the services is considered particularly relevant and valuable to older adults (Black et al., 2015). Understanding that sharing information is how neighbours

help each other, the give and take of sharing, Jess is doing what a helpful neighbour does.

The unexpected invitation for a *cup of tea* disrupts the comfort of the neighbourly relationship. Understanding the 'cup of tea' as an obligation Annie intuits what she ought to do; however, the possibility of obliging her neighbour is uncomfortable. Her words convey wariness with neighbour closeness. Anticipating the possibility of a closer relationship of shared intimacies, Jess distances herself. Her usual mode of friendly distancing reveals doing what she does to be free of greater obligation. She is not-at-home in the face of this burdensome obligation. Holding neighbours at a friendly distance is a mode of limiting demands on herself. Jess appears reluctant to be involved in the lives of others preferring to mind her own business. Understanding a 'good' neighbour minds their own business, Jess holds her neighbours at a friendly distance. In this way, Jess is spared the possibility of suffering gossip or disturbing personal betrayals. Holding on to familiar ways illuminates looking after oneself.

Neighbours play a subtle yet key role in the day-to-day lives of older women, consistent with previous research that supports the importance of friendly and supportive neighbours who 'know their boundaries'. While women enjoy living amongst (usually long-term) neighbours who were friendly and supportive, they were adamant that this connection did not impinge on their sense of privacy and independence (Walker & Hiller, 2007). Living everyday life in older age illuminates being-with others in a mode of friendly, helpful neighbourliness while preserving a comfortable distance.

Gik tells of holding to familiar ways of being in the neighbourhood that show the strangeness of being 'old'.

> *That path goes around the park. It's a lovely park with a skate park and flying fox for the kids and a grassy patch where the kids play football. In the weekends there are lots of kids on bikes using the path which is fine. We don't mind. We just get out of their way. On Tuesday there weren't so many people. My husband plods on with his walker. He's getting very slow but he manages the path and the gentle slope. I prefer to run around. I've always run. I won't run if there are people around because I figure they think, 'oh, that silly old woman'. There were few people around so I ran round three times and I felt better for it. I stopped to chat with this Indian woman. On our way back to the*

> *car, I stopped to look at the communal gardens. I'd really like to weed*
> *it but I think 'I better not touch it'.* (Gik, 89)

Being familiar with the park makes it possible for Gik and her husband to be involved in what the park makes possible for them both, each in their own way. Finding few people in the park appears a surprise, as if the park announces itself anew. Noticing its emptiness this day opens the space for running. Trusting her body to run she runs. Running lets her know that she can still run in the manner of doing what she has always done. The park opens her to herself and she finds herself *better* for running. Understanding herself as a runner and a gardener she is drawn to weeding the park gardens in much the same way that seeing the park calls her to run. Gik is comfortable when she is free to run and when she has her hands in soil. Involving herself in old familiar ways, Gik finds herself at-home in the world.

However, she is not always at-home in the neighbourhood. Finding herself holding back she hears the unspoken words of others calling her *a silly old woman*. Concern for what she intuits 'they' say, Gik ordinarily holds back. Uncomfortable to involve herself in the neighbourhood in ways she prefers, shows concern for 'fitting in'. Gik behaves in ways she understands an older woman should behave. On the one hand, if she runs she is behaving in an unaccustomed manner for older people; on the other hand, slowness is being in the way and she must move off the path for others to pass. Neighbourhood participation shows concern for the strangeness of being old. For Heidegger, "Dasein (the kind of being we are)…understands the world, and that it is always comporting itself towards the world" (Wrathall, 2005, p. 21). Thus, in 'fitting in' Gik's purpose shows holding on to everyday ways of participating for the sake of being comfortably with others in the world.

Being Busy

Living everyday as a day filled with something waiting to be done, is being busy. Being busy is a way of being-in-the-world that reveals more than no time to think about how to fill the day. Busyness reveals itself for the sake of something more than filling time.

Joan describes the busyness of her ordinary day is to be doing things for others:

> *My neighbour arrived at 9am on Monday to pick me up. I was ready*
> *and waiting so, I don't hold her up. We're in the local Flower Club*

and we had our last meeting of the year on Monday. It's always a good time. We loaded my flowers and vegetables in the car. As soon as we got there, I was busy. The first ½ hour is busy setting up our displays. I had three flower arrangements to do and I had some vegetables to display. I'd had to slow my prize rose down so it would be ready on the day. I'd put it in a dark cupboard for 3 days and on Monday it was perfect. I was very happy with it. I'm always running around last because I've got more entries than anybody. I've got a big garden and I'm always busy in it. I've got so much I have to give it away or I make pickles for the stall. By 10o'clock they rang the bell. I was ready but I was rushing to the end. (Joan, 89)

As Joan describes participating in the monthly flower club meeting, we hear the busyness of participating. From one month to the next Joan is growing, harvesting, and preserving the produce from her garden for others. Joan's being-in-the-world is for others. Her concern for others is shown in being *ready for, giving to and making for* someone. This is how she knows herself, as a provider. She involves herself in the world through giving to others. As a mother raising her sons alone and with little money, she spoke earlier of providing for her family from the garden. She is comfortable in knowing her garden will provide as it has always provided. As a gardener, Joan is at home in the garden. Gardening is how she continues giving to the neighbourhood as a mode of participating.

Joan tells of how she is very happy to be involved in the local flower club. The club opens her to its opportunities for displaying her gardening knowledge and skills to her neighbours. Her readiness for club day is already there drawing Joan towards the display table. Through her story, Joan keeps returning to the busy-ness of being in this day. She throws herself into the day, *rushing* and *running,* uncomfortable in the possibility of being un-ready for the moment for which she is preparing. Understanding herself as always busy is Joan's way of being in the world; it is who she has always been and is today. The mode of being busy appears to light her up. Holding on to what she has always been doing invigorates her, giving meaning to her busyness.

In this story, Gik's habitual busyness is having something to do.

I went to the library to get Bill's books. I don't use the library for myself because it takes me all my time to read the Listener and the Time magazine. I'm way behind with them. I don't sit and read. If I'm sitting, I'm knitting. I do like reading. I saw lots of people were sitting

there and I thought how nice it would be to have time to just sit quietly and read. On the way home, I was thinking about all this material I've saved over the years and I started thinking about what I could make for the kids that need clothes. I'm never wondering what to do with my time (Gik, 89).

The ordinariness of going to the library uncovers the things Gik concerns herself with in the everyday. Her day is filled up with making things, doing things, and attending to things. Engaging in her interests fills her day. Reflecting on everyday busyness Gik notices the fullness of this day and every other day. Finding herself always on the go and moving is Gik's preferred way of being. More than the comfortable familiarity of being busy, busyness has taken a hold of her. As she reflects on her day, Gik understands she is *never wondering what to do with my time.* She would be at a loss if there were no-thing filling her day. Comfortable with the fullness of her days she holds on to familiar ways of participating for the sake of having things to concern her. Yet, habitual busyness may prevent novel intrusions covering the day in a thin grey pall.

Gik's every day is participating in many activities that engage her *thinking about* how she might help others. Knitting and sewing is what she enjoys and how she knows to participate in the world. The physical-ness of participating contrasts with the quiet repose of those sitting in the library reading. Recalling her love for reading calls her to notice the unread magazines waiting for a day when she has nothing to do. The growing pile serves as reminder of her busyness. This is to say, Gik lets herself be involved as a mode of participating for the sake of having something to do to fill her days. While the pile remains, Gik is involving herself in the neighbourhood. Comfortable with everyday busyness she is participating in the neighbourhood. Having many things to do sustains a mode of participating in the neighbourhood.

As Annie describes how she must 'just get out' of the house we glimpse everyday busyness is necessity for being-with others.

It's not very often that I don't have something to go to. I'm usually very busy but I hadn't been out for three days. Usually I'm busy with U3A but there was no meeting this week. I was starting to feel stir crazy. Don't get me wrong. I'm very happy being on my own at home, but I did feel like just getting out. My daughter and I often go out together so I tried her but she was busy. I didn't need to go to the library so I decided I'd take the bus to the Hollywood café just to get

out. It's easy for me to get there and once I'm at the Hollywood there's a good chance I'll get involved in conversation with a stranger. There are always a lot of grey heads in there and they're more likely to talk to me. This day was pension day and it was full of older people. We're busy doing the same thing, enjoying the free Herald and free muffin with our coffee. We're all focused waiting to pounce on the one newspaper as soon as someone's finished and it gets people talking to each other. It's good they don't play that loud awful music but sometimes it can be quite loud with chatter. (Annie, 89)

Annie describes the sudden unaccustomed experience of having nothing and nobody calling her into the neighbourhood as a feeling of going *stir-crazy*. Accustomed to being busy she expects to be somewhere and with someone most days. Being drawn to do things for the sake of being-with others shows the busyness of her ordinary day. This day she is uncomfortable having no-one and nothing that calls her into the neighbourhood. Her not-being-at-home in the house crept up on her and announced itself as aloneness. Seeking the company of *grey heads*, discloses a felt necessity for being with others. More than busily doing things on this day, Annie yearns for the company of others *more likely to talk to me*. Thus everyday busyness involves being in the company of others willing to interact with her. Understanding older people are more willing to talk with her, Annie is at-home amidst older neighbours. The likeliness of conversation with older adults suggests the unlikeliness of such interactions with younger people. The mode of being-with neighbours is involving herself in conversation.

Holding with Routines

The ordinary things performed in the neighbourhood such as the supermarket shopping often occur on a particular day of the week. The familiarity of keeping to routines is comfortable and reveals everyday participating.

Eileen speaks of a bus-stop routine shared with neighbours. Holding with this routine is being-with others as a mode of participating.

I catch the bus every Friday. I usually leave here about quarter past eight. That gives me time to catch my breath and have a chat. If anybody is down there willing to talk, I will talk. The other day I wasn't going to come out. I just didn't feel like it, but I remembered that this little lady would be there. We catch the 9.10 bus every Friday to the supermarket. I got down to the bus stop, and she was there. We sat there and talked. We talked about the world and what's happening.

You know – things like that. We catch up on everything. We talk to anybody who's down there. We've got a young chap that comes down there and he likes to have a chat and a natter. He's different. He's got a car so he doesn't have to catch the bus but he seems to like the chat. Quite often another chap from one of the units up the hill will be there, but he wasn't there on Friday. (Eileen, 90)

Friday morning is the day for supermarket shopping. This Friday, last Friday and possibly next Friday, as she has for a number of years now, Eileen catches the 9.10am bus into town. This routine creates a predictable and orderly pattern to the everyday. The routineness of her being in the neighbourhood speaks of its significance to being there. Eileen tells of being there with others; a being-with in conversation. She is open to talking with anyone *willing to talk*. It's only when the mundaneness of the routine looks to be disrupted that we glimpse the complexity of the familiar things that she does to be-with others in this familiar place. The ordinariness of what she must do to get there for the sake of companionship falls silent. Living with pain and declining mobility she must begin preparation early for leaving the house. Once out of the house she musters energy to walk the 15 minute walk, dodge the motor traffic to cross the road, wait in the middle of the road with no barrier protection to continue finishing the crossing, then walk a distance uphill to the bus-stop. Today she *didn't feel like it,* suggesting the significance of holding on to the familiar ways as a mode of participating in the neighbourhood.

Noticing the 'little lady' and couple of 'chaps' reveals them as familiar people in this familiar place. Remembering the 'little lady' would be waiting compels Eileen to maintain the routine for the sake of others who share the routine. The shared routine is imbued with an expectation to be 'there' for the sake of the other letting the routine reveal itself as more than her personal routine. As a neighbourhood routine, it establishes itself temporally and spatially. Same time, same day of the week here in the bus-stop, the routine announces itself in its routineness. The routine reveals itself as participating in the ordinary everydayness of neighbourhood life. Everyday life is that which is routine, repetitive, and rhythmic. Doing the same things in the same places at the same time is what reproduces social life (Scott, 2009). Eileen lives alone. *Catching up* with her neighbour appears to be more than companionship; it is shared interest in the other. This might be the only time and place where somebody ordinarily takes an interest in her.

In the comfort of the bus-stop Eileen finds herself at-home chatting with the others. She is absorbed in the bus stop conversation, dwelling there, immersed in conversation. The bus-stop is a place given to being alongside others in-waiting. In a mode of waiting, Eileen is open to the possibility of being drawn closer to those alongside her through conversation. What matters when in the neighbourhood, is wanting to be close to her neighbours. For older adults with few places to meet with neighbours, the bus-stop is a place to inhabit, to 'dwell' in companionship. More than the bus-stop as a place for waiting, the comforting familiarity of the bus stop opens itself to neighbours being together in companionship. At-home in the bus-stop Eileen is comfortable being-with her neighbours. Holding on to routines is a mode of participation.

Sisi routinely walks his dog in the local park. This ordinary routine lets being-with neighbours happen.

> *I have an electric (mobility) scooter and I take the dog for a walk down at the park. It's a great community facility and so close. Yesterday I scootered down there. A couple of my friends were already at the bridge by the time I got there. That's our meeting place. I've got a great group of friends with the dog. They're more acquaintances I suppose. We meet down there about 5pm in the summer. There's a lot of teasing that goes on; it's all in good fun. The dogs know each other and run around. He just loves it there.* (Sisi, 89)

Yesterday at 5o'clock, Sisi met his friends at their usual meeting place. The routines of being there show the park as a place to gather. Routinely using the neighbourhood park has opened itself to being-with others as friends regularly meeting with their dogs. For the sake of the friendship, he keeps to routine. The routineness of these friendships suggests they live nearby, thus they are neighbours enjoying the park as a local facility. Sisi distinguishes the friendships as *acquaintances* suggesting the relationships are casual. The absence of closeness further suggests the friendships are related to a particular set of circumstances that lets them enjoy each other's company as friendly neighbours.

Holding the Past

Remembering the past shows the past is always present in the everyday. Having the past flow seamlessly into the everyday is a way of keeping it safe. Holding the past is

safe-guarding against it being lost. Sisi continues with his story of being at the local park.

> *I keep a good eye on him [the dog] so he's not down amongst the birds. I'm told there are kiwi down there. My wife. My late wife loved that place. We'd go down there often and walk around the park. She loved that park.. We'd go down there often and walk around the park. It's got a good view out to sea. It's a special place for me.* (Sisi, 89)

As the story continues, the essential routineness of the routine is how Sisi can be with his wife. This is the first mention of his *late* wife. The fact she is gone is held back in the story, not because it is unimportant, but rather it was the most difficult part to reveal. Sisi mentions they would *walk around the park…she loved that park.* The park symbolises what they did together; the place they loved being together. Walking the path alone and looking out to sea is being there together. Ontologically, his being-with is a mode of holding on to routines. Sisi speaks of an everyday dwelling with things of value that make the park 'special'; his wife and the birds, most particularly the 'kiwi' bird, a rare and endangered flightless bird native to this country. He has not seen the kiwi hidden in the bush but having knowledge of their possible presence is sufficient to cause concern for their safety. Understanding the threat to the birds posed by dogs off the leash, he is uncomfortable and takes on the role of protector. He recognises that in doing so he has made more *dog enemies than dog friends* revealing himself at the whim of not only the kiwi but of the park. "It helps us to grasp the particular place we are in as the particular person who we are" (Casey, 2001, p. 684). In this way, Sisi shows himself as someone who is safeguarding what matters from the past, holding it in the present and into the future. The park is not merely a place Sisi comes and goes from but it holds him in its ambience. First his body holds onto the place by feeling it as being-with, then in his memory as holding it in his mind. He lives and experiences the park. Thus, holding on to things shows as dwelling with everyday neighbourhood participation.

Oonah's story, like many participants' stories, merges past and present in the telling. Oonah tells of being at a concert and being suddenly thrown to remembering the past. Telling of the past illuminates Oonah making sense of her everyday involvement in the neighbourhood.

> *I recently attended a combined schools concert. I was sitting on the outside seat next to the aisle and I saw these Māori children walk past and onto the stage. I suddenly noticed one of our crochet tops. I knew*

these costumes because years ago we made them. It was thrilling to see them used. We designed and made them over 40 years ago for the local children's music centre. One day a woman approached me about setting up a Māori cultural group. The committee eventually agreed we could have a Māori choir but not a cultural group. So, a friend and I got to and designed the costumes and made them. She organised the embroidery guild members to make bodices for the girls while I made skirts out of plastic things and I got others to crochet bands to keep the skirts up. My husband made the sticks for the stick games and others made poi. So seeing these costumes prompted me to visit the local music centre. I met the supervisor and I was asking when the 50th anniversary was being planned for. I realised it must be sometime soon. She said she was new but she thinks they had it last year. I was very sad to hear that. Sad I hadn't been invited. I'd been to the 40th and at that time I'd said I would be here for the 50th. (Oonah, 89)

Attending a local children's performance, Oonah suddenly noticed *our* tops. As the story continues, the essential being-with others in the making of these costumes is revealed. Oonah *knew* these costumes, more than in the sense of recognising them, but in the sense of them being of 'our' creation. The 'ourness' symbolises belonging. Oonah's detailed ontical description of the place and things continues. In the detail, she speaks of a dwelling with things "invested with value" (Heidegger, 1962/2008, p. 92). In her remembering, creating the costumes shows as being important. Dwelling in the memory is being there together with her late husband and friends of the past; past merging with the present. In that moment, her past is brought forth into the present.

Seeing the costumes out of place reveals her understanding of them as a 'thing' in relation to time and place. The costumes belong to the neighbourhood music centre. Things are there 'as' belonging. Heidegger holds that we can never understand a tool or other piece of equipment in an isolated manner because what defines that equipment is its relations to other equipment. To use Heidegger's example, a hammer cannot be understood except within the context of nails, pieces of wood, etc. Seeing these costumes worn by 'outsiders', isolates them as a 'thing', a piece of equipment that does not relate to the wholeness of what it is. As Heidegger (1962/2008) put it, "to the Being of any equipment there always belongs a totality of equipment, in which it can be this equipment that it is" (p. 97). Furthermore, this totality only reveals itself when our equipment breaks down. Seeing the costumes as

a 'thing' reveals its 'thingness'; worn by 'outsiders' revealing its 'ourness' of community; the uncomfortableness of the situation reveals itself.

In the moment of seeing these costumes, Oonah is thrown to remembering. To remember is to re-enter the past and to be with that which is no more (van Manen 2002). Holding the past gives Oonah a way of making sense of her involvement in the neighbourhood through a past neighbourhood event. Understanding the hostile attitude of the public 40 years ago toward 'things' Māori, Oonah positions herself outside the public thinking of the time by telling of her intention to establish a Māori cultural group. Striving toward a community more inclusive of indigenous music she tells of successfully gaining approval for a Māori choir, similar but different, yet more socially acceptable for the times. By using historical references, people reproduce and reformulate dominant narratives in a given historical culture within societal, political, or cultural contexts (Nordgren, 2016). The merging of horizons lets her stand in the present and make sense of the significance of her involvement in this past event (van Manen, 2014).

More than holding history, Oonah is using history to tell her story and in the telling she is making sense of herself in the world, through time. Her gestures are visibly more animated and her voice audibly more expressive in the telling, showing Oonah releasing herself as she connects to her history and her values. She describes creatively working together with her friends and husband making the distinctive cultural costumes; poi, sticks, skirts and embroidered tops. The detail shows the familiarity with all that occupied her in bringing community into being. The concert provided an opening to remembering, showing memories are always already there ready for remembering when an opening is created for their retrieval. The thingness of 'things' revealed in conversation reveals connectedness. "The past -experienced as authentic historicity- is anything but what is past, it is something to which I can return again and again …." (McNeill, 1992 p. 19).

Through communicating the historical culture of the club, Oonah is connecting herself to the present-day neighbourhood through her past contributions. More than the *thrill* that the costumes are being used, her excitement appears to be proudness that she was a part of something important at the time; possibly proudness that it has endured with time. Excitement of seeing the costumes *being used* is more than their utilitiarian use. Dwelling with the costumes in relation to the music centre reveals significance beyond their purpose; their existence is *real community*. The we-

ness of her involvement was more than a community effort, more than being a part of the community; the club appears to be community. Through her connectedness with the club from its beginnings, Ooanh reveals temporal belonging spanning more than 40 years. As she tells this story of the past, Oonah moves from the individual to the group to the individual and in the telling she is strengthening the ties that bind her to the neighbourhood.

Holding the neighbourhood history lets Oonah be connected to the local children, through their involvement with the club, past, present, and into the future. Historical consciousness is the process by which we, as individuals, emotively and cognitively understand the relations between past, present, and future (Nordgren, 2016). The continuance of the club suggests her continued contribution through its existence today. Through past involvement with the club, Oonah is holding the past in the neighbourhood yesterday, today, and tomorrow. Holding the past lets her tell her story to the music centre manager. It locates her as a physical presence in the neighbourhood, suggesting the rightness to be there; a member of the neighbourhood. Visiting the music centre and telling her story shows her re-connecting with her neighbourhood, understanding that telling her story will continue connecting her tomorrow and into the future. When we communicate through history, it does not generally seem to be about the past; rather, a way to interact with present needs and desires and, thus, affect the course of the future (Nordgren, 2016). The story is "utterances in motion" (Nordgren, 2016, p. 480). Holding the past shows Oonah telling her story of belonging to the neighbourhood; in the telling she is holding onto the everyday as participating. As 'keepers of the past', older adults are continuously reworking memories, whether as a mode of constructing community or possibly it is purely 'nostalgia' (Phillipson, 2007) with little resemblance to 'reality'. Nonetheless those reflective memories can serve to 'illuminate and transform the present'; thus, allowing older people to make sense of the past and create meaning for the present and future (Ziegler, 2012).

Summary

In this first findings chapter the stories show how holding on to familiar everyday patterns and rhythms is a mode of participating. Noticing the little things of neighbourhood in ways that others might look past, shows what ordinarily matters about participating. The four sub notions each show modes of 'holding on to the

everyday. By '*holding familiar ways*' participants find themselves attuned towards neighbourhood things and circumstances, providing layers of experience that hold them in place. '*Being busy*' as a mode of holding onto the everyday is for the sake of others. '*Holding with routines'* lets habitual patterns and ways of doing things participate by being-with in the everyday. '*Holding the past'* influences everyday experience of neighbourhood participation through space and time. Holding the past in the everyday is a way of safeguarding the past while living in the present. "From now till then, the next now. Now is the measure of past and future" (McNeill, 1992 p. 17).

To understand what holding onto the everyday as participation means for older adults living in urban neighbourhoods is to understand how this is in play with dwelling. Older adults sense of "at homeness" in their neighbourhood, what it means to be "at home" lets us have an understanding of participation. Dwelling, or the willingness and ease of being here, of residing here, of being in this neighbourhood rich with history and living significances is important in older adults everyday lives. So too, ordinary routines give meaning and purpose for being in the neighbourhood that let older adults develop and maintain relationships. Dwelling is "always a staying with things" (Casey, 1997, p. 273). Dwelling in the comfort of ordinary ways of being in the neighbourhood is holding onto the everyday as participating.

Chapter Six: Being Neighbourly as Participating

Introduction

The previous chapter revealed being at home in the familiar ways of being in the neighbourhood. This second findings chapter shows participating as being neighbourly. The neighbour relationship shows as a particular relationship of 'care'. The search to understand what neighbourhood participation is, and how it plays out for those aged 85+ years, has a focus on care.

Neighbourly relations have been theorised as friendly, and distant or strong ties are used to describe the type of neighbour relationships that characterise urban neighbourhoods today. Policy concern for the interactions of neighbours that constitutes social capital is one of concern for protecting against isolation and loneliness of neighbourhood residents. The ways in which the older adult participants in this study talk of their experiences shows concern for neighbourliness that goes beyond the relative distance of their neighbour relationships. Participating as a neighbour through involvement in neighbourly acts and relations appears *as* participating. Certainly, being neighbourly as a way of being has elements of neighbourliness. Participants' stories point to being neighbourly with neighbourhood care at its heart. The thoughtful concern of these older adults for neighbours is guided by considerateness. Accordingly, neighbourliness can be understood from the Heideggerian notion of solicitude. The key notion for this second finding chapter is "Being neighbourly as participating". A number of sub notions: 'helping', 'being purposeful' 'giving', 'gathering', 'protecting' and 'connecting' show *as* participating.

Helping

Being 'called' as neighbour implies having a sense of what ought to be done for something or someone. Understanding a call for help implies a sense of being compelled beyond oneself to act, to give assistance. Understanding the call as a call and responding (or not) illuminates everyday participating as being neighbourly.

Oonah tells of receiving a call for help from her neighbour. Receiving the call and responding is being a neighbour helping another neighbour

> *He and his wife have been neighbours for about 40 years. His wife has dementia and he cares for her. On Friday he rang up and said, 'she's disappeared'. I said, 'I'll go and look for her in the usual*

places'. He can't drive because he's just had a hip operation. I drove around the usual streets where we've looked before, but I couldn't see her. I asked a lady standing out on her veranda but she hadn't seen her. I couldn't find her. When I got back to the house he was very uptight. He rang the police. It turned out they'd just had a call from one of the shops to report she was with them. I didn't think to stop and ask at the shops. Next time I will. While we waited for the police to bring his wife home we just talked and gradually he calmed down. When the police car arrived at the house I helped her out of the car. When she came in they just fell into each other's arms. It was such a very warm welcome. I was so relieved because he had been very angry. (Oonah, 89)

Oonah describes receiving a phone call and hearing her neighbour's voice say, *she's disappeared*. While unexpected in that moment there is a familiarity about the event that shows her 'knowing' it as a call for help. Oonah already knew what she was being called to do and without hesitating, she knew to *go and look for her in the usual places*. Her knowing comes from previous experiences of her neighbour disappearing from home. Her learning has come from living alongside these neighbours for more than 40 years; through being-with her neighbours.

Her neighbourliness lets her hear the 'call', just as her neighbour understood he could call on her. In this historic knowing her neighbour, she assumes an understanding that does not require explanation. The call for help is one neighbour calling on another to be-with in this moment of need. Oonah understands what she ought to do in the situation and responds by giving service without hesitation. Heidegger wrote of the call to do something as the *"conscience"*. "Conscience gives us 'something' to understand; it *discloses*…it is revealed as a *call…* The call of conscience has the character of an *appeal* to Dasein" (Heidegger, 1962/2008, p. 314). Oonah's conscience appeals to her, summoning her to act. Oonah hears the call of how to be a neighbour. While she had not anticipated this moment, she has past experience of being 'called' as a neighbour. Her response to this situation shows her deeply held understandings of how to be as a neighbour. Solicitous concern is understood in terms of what we are concerned with and along with our understanding of it. A calling beyond oneself is being summoned to act. It is as though the call comes *from* (her) and yet *from beyond* (her) (Heidegger, 1962/2008). Grasping what ought to be done she speaks of how *we waited, we just talked, I helped her out*; this

is how she understands being with her neighbour; giving as a neighbour. The call is the call as neighbourhood giving.

Oonah's actions show concern for others as care. Providing solicitous care helped relieve the aloneness of her neighbour in this situation and at this time. All the while, Oonah anticipates the inevitableness of responding to the call *next time*. While able to give help in this situation, there may come a time when she is no longer able to respond. Solicitude is guided by *considerateness* and *forbearance* (Heidegger, 1962/2008), and so she will respond to the call again and again for as long as she is able. The Dasein of caring *is* receiving and understanding a call for help.

Jonah offers a different perspective on helping in a way that takes him beyond himself, drawing neighbours together.

> *An old fellow talked me into collecting tabs from soft drink cans for the children's hospital. I pick up cans when I'm on my walk and tear off the tabs. I carry the cans with me until I find the next recycling bin and dump them into it. Sometimes it's embarrassing and people will ask "what did you just pick up?" I tell them and I don't mind if they laugh and think I'm an old codger. I'm removing the cans from the street and helping the kids' hospital. I'm doing something and I like that. Yesterday I was coming home carrying tabs in my hand and a lady in the street smiled and said 'hello'. I didn't know her but she must have noticed me picking up cans because she offered to put the can in her rubbish bin.* (Jonah, 89)

Understanding the children's hospital needs help with fundraising, Jonah responds to the call as a lone endeavour that involves collecting the tear-tabs from discarded drink cans. The call to help is silent; it comes from his concern for *the kids*. Philosophically, "conscience manifests itself as the call of care...its Being, is care" (Heidegger, 1962/2008, p. 322). Immersed in doing what he is doing, Jonah is lost to himself in the ordinariness of picking up discarded rubbish as he walks the neighbourhood. Making his helping efforts part of his everyday neighbourhood walk his neighbours are alongside him without their involvement.

Jonah speaks of himself as a solitary person who rarely seeks conversation or the company of others. Yet he is being-with others through helping. More than merely going for a walk, he is in the neighbourhood *helping* in ways that take him beyond himself. Amidst unacquainted neighbours, he notices their responses to his helping activity. He observes a smile, hears a passing comment for him, and recognises an offer of assistance. His neighbourhood encounters are being noticed.

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The one noticing the other makes each present to the other. In the moment of noticing, his neighbours are brought closer, revealing the everyday ordinary manner of passing each other unnoticed. Amid this ordinary event, the experience of having something which is always already there suddenly disclosed is seeing the neighbourhood afresh. Ontologically neighbourhood participation is Being-with others concernful of everyday indifference or absence of care.

Responding to the enquiring looks and comments Jonah explains his actions and thus expands the focus of concern beyond himself. In that moment, he draws the neighbours together in shared concern for neighbourhood helping. In the moment, they are together as neighbours attending to *the kids* and cleaning up the streets. Together they are open to a greater concern for helping others. Jonah's search for a recycling bin, not just any convenient rubbish bin, shows a greater concern for the environment. Jonah is doing his bit for the neighbourhood and his contribution is noticed by others. Participating as a volunteer, his helping actions open him beyond himself to be with others. Helping with others illuminates caring as a mode of being neighbourly.

Being Purposeful

Having a purpose gives meaning. It is having a sense of contributing to something that matters. Purposefulness shows in doing things for others, of giving for a common purpose.

A long-time member of the local church Gik reveals a purposefulness in giving to the church and the neighbourhood.

> *My husband and I have always been involved in the local church. As a church we do things for the local schools and we also have a lot going on at the church. I volunteer at the toy library where I'm helping the young mothers and their children. And it's wonderful. Last Wednesday I went down and I just help them checking in the returned toys, and putting things away. They can be very busy and I just help with whatever is needed. I helped this woman take her toys to the car because she had children to hang on to. It's difficult for them to manage the toys, and the little kids with cars coming and going. They're just grateful for an extra pair of hands. One of them said, 'I don't know how we got on before you came'. I'm enjoying it. A few weeks ago a woman asked me to hold her son, Benjamin. He went to sleep on my shoulder so I sat down and nursed him. Such a dear little kid. I didn't have to do any work.* (Gik, 88)

As Gik tells of her involvement with the local church, we hear how her need to *just help* unfolds in a way that gives her neighbourly purpose. Being a member of the church, she is called to *do things* for the church community. The silent call comes as a call from within to perform her obligation both to the church and the neighbourhood. Heidegger (1962/2008) wrote of the "public conscience… (as) the call comes from that entity which in each case I myself am" (p. 324). The call to 'help' others draws her toward helping in ways she understands help is *needed.* The need to help appeals to her need to be helpful. Gik describes the marvel of feeling useful when she gives a 'hand' and receives words of gratitude in return. There was a respect for and an awareness and understanding of what Gik had to contribute, of the purpose for her being there. It is these casual encounters that call Gik to help.

Previous experience of helping means she 'knows' what to expect and how she feels; she is an experienced 'helper'. Gik understands the *wonderful*(ness) of volunteering her time to the community. She emphasises the purposefulness experienced in contributing to others as something much greater than herself. The appeal of care-full purposefulness is what calls her again and again. "Only *from* an understanding of the appeal and together *with* such an understanding" can the conscience be grasped (Heidegger 1962/2008, p. 324). From her need to be helpful we can grasp that Gik finds purpose through contributing to the neighbourhood. The experience of being purposeful compels her to keep on helping neighbours. Purposeful helping as being neighbourly is a mode of participation.

Gathering

The act of coming together as neighbours implies a place for gathering and a willingness to gather as a neighbourhood concerned for neighbourly togetherness. Stephan uses the library and contributes to the library service. His story touches upon something that a number of participants spoke to; the importance of keeping an eye on what is happening as a way of caring for the neighbourhood.

> *We're part of the Friends of the Library. It's like a support group for the library. We just keep an eye out for the library and give feedback. There's usually a meeting once a month and there'll be a speaker. It's not the best venue for a speaker. It's too small. I think they found there was a need but it wasn't designed for a big enough group. We've had up to 100 people and there should only be 50 there. It's an adjunct. It's not the right shape.* (Stephan, 88)

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Stephan experiences the library too small for the neighbours to gather. He goes to the library meetings because it is a place where neighbours gather. Gathering is the already 'we' users of the library. Noticing the room too small for 'us' shows that he, along with many others in the neighbourhood, want to gather as neighbours sharing a common interest. Insufficient room to gather comfortably throws a light on the importance of being together in comfort. It is only when something that is needed in the neighbourhood is not 'to hand', that the neighbourhood is encountered. The neighbourhood "as that wherein concern always dwells… announces itself" (Heidegger, 1962/2008, p. 105). Noticing the missing 'thing' the world is noticed for what the 'thing' "was ready-to-hand *with,* and what it was ready to hand *for* (Heidegger 1962/2008). In this matter, concern for the crowded conditions is more than just a utilitarian concern; it is concern for an at-homeness that is neighbourly togetherness. Gathering lets neighbourly relations happen. Unable to be housed comfortably suggests concern for the neighbourhood that evolves from the interaction of neighbours within the library. The environment announces itself afresh as concern for neighbourhood. That is to say, the inadequacy of the space threatens neighbourhood gatherings. A design emphasis on the physicality of the space, its objectively defined properties, fails to capture the complex socio-spatial construct of gathering places (Johnson & Glover, 2013).

Crowdedness of the library reveals the space to be more than a repository of books and learning; it has become a neighbourhood-gathering place. The meaningfulness of the library as a public place for being-with neighbours is significant for Stephan. As a neighbour 'watchdog' for the library, Stephan speaks of crowding out of a greater concern for a neighbourhood that may no longer be characterised by gathering.

Protecting

Guarding or looking after something of value implies a responsibility toward the thing of value. It is sensing the threat to something that matters. The following two stories tell of looking after what matters for neighbourhood living practices and show what needs protecting.

Denys, a retired architect, has been a committee member of the local Heritage Trust for a number of years. As a protector of heritage buildings, he is concerned for

the 'character' of his neighbourhood. More than looking after the buildings, he is attending to the dwelling practices of neighbourhood.

> *I took the bus into town for the local Heritage Trust meeting. I've been on the committee for years. I'm responsible for overseeing our funds. We had a couple of applications from homeowners wanting small grants to return their home to its original style. Small jobs like putting a veranda back where one would originally have existed. One application we discussed was to replace a front door to their old home that was more in character with the style of their house. That sort of thing. We discussed at some length, how to respond to a request for advice on replacing their crumbling chimney in keeping with the era of their house. It's all very interesting. So I keep tabs on our spending. But I looked around the room and we're all white heads. We have a problem getting new members to join and we could all fall down dead tomorrow.* (Denys, 88)

A retired architect, Denys is a repository of architectural knowledge and skills. More than a working knowledge of heritage buildings for their form and structure, he holds an appreciation for their *character*. Understanding that the *character* of heritage buildings is in their detail, such as the front door and chimney, he is concerned for holding onto the trueness of buildings for their era; to their authenticity. Retaining the perception of "authentic" heritage is connectedness between the "perceived world and the lived world [connecting] us with the places in which we dwell, and temporally with the past and future" (Dovey, 1985, p. 47). Denys cares about preserving heritage buildings and this can be aligned with Heidegger's writing on "dwelling' and "place", with the places of life and the activities that they support telling a story of how people lived. The buildings appear more than their characterful nature but suggest everyday ways of living life; of dwelling practices

Denys speaks of difficulty attracting new membership to the Heritage Conservation Trust, suggesting the younger generation lack appreciation for a distinctive neighbourhood 'character'. The heritage buildings are what give this neighbourhood its distinctive character. Its character is what makes this neighbourhood like no other neighbourhood. Working to preserve and conserve the neighbourhood 'character', is holding onto what makes it 'this' neighbourhood. Its this-ness is a neighbourhood true to itself. Character as a form of place identity is threatened with placelessness – with becoming like anywhere else where 'routes'

replace 'roots' (Freestone & Liu, 2016). The concept of 'character' is a partial synonym for place, especially within urban politics where "neighbourhood 'character' is a form of place identity that needs to be defended against 'inappropriate' development" (Freestone & Liu, 2016, p. 262).

Protecting buildings makes concern for authentic connectedness with neighbourhood visible – not only with the places that we inhabit but also as a characteristic of neighbourhood living. Denys fears for a neighbourhood lost to the world of rampant urban construction where shoeboxes are stacked over carparks, in various shades of beige and not suitable for dwelling; of sameness and disconnectedness. Thus, preserving old buildings is a mode of challenging a deeper disconnectedness from the places that we inhabit. A disconnectedness one might call homelessness that stems from loss of dwelling experiences in a world of rapid change and mobility. Preserving old buildings show us a way of living that has gone before, that we might connect with our past through dwelling practices. Thus, protecting old neighbourhood buildings reveals a greater concern for people's way of dwelling or inhabiting their neighbourhood in connectedness. Protecting neighbourhood character, is attending to the dwelling practices of the neighbourhood.

Betty's experience of shopping at the mall shows what happens when the neighbourhood does not open itself to being neighbourly.

> *I went up to Albany Mall for a zip and buttons. I'm sewing a dress for a friend and the best shop for my sewing bits and pieces is in the mall. There are closer shops but the mall is convenient. I go after the work rush hour and it's an easy drive up the motorway. I'm on the motorway within a minute and then it's so easy; 15 minutes on the motorway and I'm there. It's easy parking and it's free. It was raining but I'd parked close by so I didn't get wet. Before I did my shopping I had jobs to do so I stopped at the post office, then I went to the bank and then onto the chemist. So easy. I wasn't going to the doctors today but my doctor's clinic is just before the mall, so that's another thing. I know malls are clone-like and the shops are all the same but I'm not into those shops anyway. I'm not there for the shopping treats, it's the convenience. I had everything I needed right there without having to think.* (Betty, 89)

The ease of mall shopping shows its convenience for Betty to complete a number of *jobs*. Having *everything I needed right there* is what makes the mall a

convenient place for doing her shopping. The mall holds a collection of familiar shops and services that makes it easy to be there. Betty describes the experience as *easy*, *close*, *free*, and *convenient* showing the easiness and convenience of having what matters close-at-hand. The facilities are ready-to-hand for her use. "The ready-to-hand come explicitly into the sight which understands" (Wrathall, 2005, p. 38). Understanding the products and services as those of use to her and finding them ready-at-hand for her to use, Betty sees their convenience.

Convenience shows the mall as functional. The shops are generic and the shoppers are generic. The mall allows her to purchase and perform the day's tasks. She goes into a shop and she is just a shopper. What appears to be missing in the telling of this story is an absence of connection with anything or anybody. She knows nobody, she tells of no greeting or conversation with anybody. Betty takes up the functional mood of the mall. The shopping holds no meaning beyond its functional efficiency. There was a time when shoppers and shopkeepers did have relationships; when shopping held meaning. The endless and empty repetition of *clone-like* shops hold no appeal for Betty. They blur into a bland palette of sameness that renders them characterless. The shopping experience is empty and meaningless. The ordinariness of having no relationship with the shopkeepers causes it to fall silent, but it is there. The silence announces the loss of dwelling experiences that constitute neighbourhood as 'home'. Failure to protect the neighbourhood illuminates loss of neighbourliness that may hold greater concern for older adults' participation.

Connecting

Many of the conversations throughout this study were spoken in terms of bonding together or having ties with the neighbourhood. Neighbour relations that bind and tie together are connecting relationships with neighbours and the neighbourhood.

Having a long involvement in the local flower club Joan shows how participating is a mode of being with others. Sharing a common interest is what connects Joan with the members. When caring is not there, the connection is threatened.

> *I don't enter so many categories at the Flower Club anymore. The committee sort of let me know I was winning too much and nobody else was getting a chance. But now, it's not so interesting. There are about 50 of us and lots of them are my age. Some just come along for the company but the rest of us were rushing around. After we'd*

finished setting up our displays, we chatted amongst ourselves and I bought a few things from the trading table. I gave a few bits for the trading table including my pickle. It's always a winner. Once the judging was over we sat around chitter chattering over lunch and a cup of tea. It's really nice. They're a lovely lot of ladies. Apart from a couple of people in the street I've got nobody really close so I enjoyed the chatter. (Joan, 90)

In the moment of being thrown from a world where she was accepted and acknowledged for her achievements she experiences being unwanted and possibly disconnected; she is out of place. As someone who likes being tested, she understood her place in the club as a competitor. Discouraged by others from competing she finds herself 'out of place'. Sensing that she is not liked, Joan feels the 'club's' disregard for her; its indifference. In the throes of pulling away, of disconnecting, she notices her aloneness. The growing distance draws her to see that she does not have anyone *really close*. Contemplating the possibility of losing her ties with the 'club' illuminates Joan's loneliness. Suddenly what was ordinary announces itself in the face of loneliness. Accordingly, her disappointment shows as things being *not so interesting*. Yet Joan continues participating.

Her mood discloses what matters. Concern to be-with-others shows in her willingness to go beyond her disappointment. Understanding that the ties with the 'club' are what connects her to the neighbourhood, Joan resigns herself to be there with 'they' who are there *just for the company*. More than 'just' the company, it is being-with others in a mode of companionship. Being-with overshadows her disappointment of not competing. Shifting her attention toward the *chitter chatter* there is a sense of making space for neighbour relationships to occur that lets her see what was always already there. Connecting with companionship opens Joan to its neighbourliness. Willing to connect with others reveals neighbourliness as a mode of neighbourhood participation.

The following story shows Tessie connecting with her neighbourhood. Having lived in the same home for 92 years Tessie has lived through a time when this inner city neighbourhood was once poor, a time when neighbours knew each other. Living amidst a much changed neighbourhood, Tessie shows connecting and what happens when opportunities for connecting are not there.

I like to sit on my front porch and do my fancy work and my knitting. I like to keep my hands busy but I'm not as good now as I used to be.

When I am out on the porch and people walk by, I will say 'how do you do' and we will smile at each other. Nice people, but I don't see much of them anymore. They are all at work now. I used to know all the neighbours; now I wave as they come and go in their cars. We used to be in and out of each other's houses. I made their wedding dresses and they had their babies here. They lived here a long time, but not anymore. Many of the houses are gone now. The other day I was sitting on the front porch and this man walking his dog stopped. We started chatting. He asked me how long I had lived here. I told him my mother and father were both born in this suburb and I have lived in this house for 92 years and so on. He told me he has a book about the area and came back to give me the book to read. It's very interesting. Actually, I've still got it. (Tessie, 93)

Tessie tells of how one day a neighbour *stopped*. The nature of Tessie's sitting embodies neighbourliness and it invites the neighbour to stop. His stopping reminds her that this is what neighbours would do. They would stop and talk with each other. Sitting on the porch, her there-ness is waiting for something to happen. Having this man stop and say 'hello' is unexpected. In the moment of stopping, Tessie is noticed; somebody saw her. The gift of having someone stop announces her mood suggesting she is lifted up and out of despondency; she had expected nobody would stop because that is not what neighbours do anymore. Possibly Tessie is resigned to 'knowing' that neighbourhoods will never be the same again. However, today someone cared enough to stop, offering a glimpse of hope for the future.

The conversation with this 'man walking his dog' is an *interesting* interlude in Tessie's day. They do not know each other but in the course of the conversation, she learns that he lives nearby. Neighbours appear simply as those living near-by; spatially close but relationally distant. The comfortable familiarity of chatting with neighbours is how she remembers her neighbourhood. In that moment, her past is with her freeing her to tell this stranger about her family and their long time connection with the neighbourhood. Through exchanging information, these two strangers are coming to know each other as neighbours of this neighbourhood. The familiarity of one neighbour taking an interest in the other appears comfortable. Recalling a time when she *knew all the neighbours* Tessie is remembering how in the past, neighbours would take the time to show interest in each other. Willing to let the man know something about her is how she knows to be a neighbour. Being open to

neighbourly relationships, Tessie is doing what a 'good' neighbour does. By being neighbourly, Tessie brings forth neighbourliness, as a gift to the neighbourhood.

Sitting on her porch gives Tessie somewhere to be in the ordinariness of her day. Here she can be out of the house and in the neighbourhood. The porch is a neighbourhood place for watching neighbours *come and go*. Amidst the busyness of the comings and goings, Tessie's stillness anchors her to this neighbourhood spot. Possibly others notice her as a familiar sight, 'the lady always sitting there'. The familiarity of her presence for those coming and going becomes a sense of the place 'they' leave from and come back to. Holding a steady position, Tessie becomes a land-mark for the neighbourhood, thus making the neighbourhood visible to others.

Dwelling in the familiar ways of connecting with neighbours she tells of still waving and smiling; yet what she 'sees' are cars. More than waving at cars, Tessie understands that this is what she would do if there were people to wave and smile to and ask, 'how are you today?' She understands that being a friendly neighbour is a way for neighbours to connect, but now she has little opportunity to be connecting. The everyday ordinary gestures of waving, smiling and saying *'how do you do'* are limited and so appear precious. The ubiquitous nature of cars replacing people dulls Tessie's interest in the neighbourhood. With little opportunity for being neighbourly, everyday neighbourhood participation is threatened.

Summary

In this second findings chapter participant stories show that being neighbourly is a mode of participating. Being-in-the-neighbourhood is being-with neighbours helping, being purposeful, gathering, protecting, and connecting that show being neighbourly. The multiple dimensions of being neighbourly are told through the stories of being called to care. Modes of care are shown as behaving, knowing, and understanding what it means to be a neighbour called to help others. The call reveals itself as being-with in relationship. The sub notions of Being neighbourly are *'helping'* that arises from a sense of caring for others as doing what is right. It is being-with, authentically caring for neighbours. *'Being purposeful'* is finding meaning in giving or contributing to others as a mode of caring. *'Gathering'* comes from a desire to be-with in a mode of dwelling-with where there are opportunities for being neighbourly. *'Protecting'* relates to looking after neighbourhood dwelling practices by holding on

to ways of living that let neighbours be connected to their neighbourhood. '*Connecting'* is being-with in relationship.

Being neighbourly is primarily about being-with neighbours. Whenever people are with others, our being and others is understood as being neighbourly. Neighbourhood refers to people living or dwelling close together. But to dwell near to someone or something has the features of relationship and interrelatedness. In the first instance, it is a reciprocal relationship; if I am a neighbour to you, you are the same to me. It is also to encounter others face to face. The importance of neighbourhood as place, is its gathering things into belonging together where one can dwell face to face in the nearness (Casey, 1997). What appears in the stories of these older participants is being compelled by conscience to act or do something for a neighbour. They speak of what it is they ought or should do as though they have no choice but to act. What appears to compel is concern for care. Encountering a deficiency of caring in everyday neighbourhood life the older resident dwells in remembered neighbour caring. Their understanding of possible options of how to behave as a neighbour is restricted to what is familiar, by doing what 'one' does or what 'they' say. Thus, yearning for neighbour caring, they respond to the call to care. Ontologically each can be a neighbour only by continually succeeding or failing to live up to what being a neighbour means. Being a neighbour understands what it means to be 'myself' in the neighbourhood. Far from disengaging, the older resident glimpses his own most potentiality for being a neighbour and responds to the call as neighbourly caring. Neighbourhood participation is responding to the call for neighbourly caring as being neighbourly.

Chapter Seven: Keeping-going as Participating

Introduction

The previous chapter revealed features of being neighbourly with neighbourhood care at its heart. This third findings chapter will draw on further stories to reveal features which point to 'keeping-going as participating'; the work to be accomplished that resides in participating itself. Everything comes into play.

Keeping-going appeals to concern for being capable. How does the adult aged 85 years and older participate in the neighbourhood not designed for their declining capabilities? Concern for holding onto what they are capable of doing requires the older adult to push through what may feel too hard for the sake of continuing involvement in the neighbourhood. Striving to keep going, sometimes in the face of adversity, the older adult is drawn out and into the neighbourhood. The 'world' of neighbourhood influences the older participants' ability to be participating. The 'work' of everyday participation is often concealed by a lifetime of doing things a certain way. The idea of human capableness or 'agency' as a moving being (*kinein*), motivated by and making decisions while anticipating what is to come, is to be understood within the context of neighbourhood 'things'. These things let (or not) the older adult be-capable. Encountering the 'things' of the neighbourhood shows things as either there and ready to be used or un-useable and standing in the way of being capable. The lived experience of keeping going reveals itself through determination for capable being-in-the-neighbourhood. This movement is recognisable in the sub notions of; *'being capable', 'persevering'*, *'taking care', 'taking risks'*, and *'having purpose'* as participating.

Keeping-going reveals a mode of determinedness necessary to do what is still possible in the face of functional decline and in face of a world that is ordinarily inconsiderate. The hyphens in keeping-going is to convey the way humans are always inextricably bound up in a unitary sense of being-in-the-neighbourhood as keeping-going. It cannot be understood as something that is pieced together by connecting two separate items. The following stories illustrate different ways of overcoming functional losses that have come with ageing.

Being Capable

Having the abilities necessary for being in the neighbourhood go unnoticed when neighbourhood things are on hand ready to be used. When they are unready to hand, both the older adults' capabilities and the equipment for performing the task become conspicuous.

'Knowing' himself as a person capable of everyday neighbourhood activities, Sisi strives to be that person in the face of self-doubt.

> *I use my car most days and I'm often at the petrol station. You do it yourself. Sometimes there is difficulty where you haven't parked quite right, or you fumble away with the petrol pump and you have to manage the thing yourself. Then you go in and you say 'I'm pump 27', and they say, 'oh you haven't put the nozzle in'. I say, 'well I'm very sorry but you're going to have to get that, because I think that's your job'. So the guy goes off and takes it out and he hangs it up. But he leaves my petrol cap open. You know I can't help believe that... well, this is bad. It may have even been a mistake, but it wasn't. That made me drag him and the manager together and give them a good roasting. I think that once they realised I had my marbles, then I was treated well. But before that, I felt that they thought they'd get away with it.*
> (Sisi, 89)

Accustomed to 'self-service' petrol stations, Sisi is familiar with what he must do to fill up with petrol. He goes about performing the routine self-service tasks in a taken-for-granted way, without having to think about it. He has never had to think about filling up at the petrol station before now – he has just simply done it. Being a frequent user of the petrol station, it is there for him without thinking about how he uses it. On those occasions, the equipment was 'ready-to-hand' and able to be used without thought that it is there, ready and waiting to be used. Heidegger (1962/2008) suggested that when the equipment is ready-to-hand its readiness-to-hand causes it to withdraw. Sisi notices that today is somehow different. Suddenly the way in which he has parked the car and not fully replaced the petrol pump nozzle become conspicuous to him. The unreadiness-to-hand of the equipment causes concern for what it needs to be ready to hand for; driving his car.

Seeing his performance through the eyes of others, he notices his parking is *not quite right* and that he has been *fumbling a bit* and *sometimes there is difficulty*. His words suggest a changing situation that causes some uneasiness. He works through his uneasiness by referring to *you* in an attempt to distance himself from that

person who is 'not quite' capable. His words, 'a bit', 'not quite' and 'sometimes', show further attempts to minimise a sense that his abilities are not as good as they were. A mode of self-doubting suggests being concerned in the face of that which is fearful. Being self-doubting reveals a fearfulness of being un-capable of driving. Living with limited mobility, he understands that driving is how he can keep attending to ordinary everyday life.

Having the situation occur in public reveals his uneasiness at what is lost to him. Understanding that those who see him, see a 'fumbling' old man rather than a person of former professional standing in this same neighbourhood, Sisi senses public disregard. The uneasiness of being disregarded illuminates what is lost to him in older age. His words *that's your job* hark back to a time when neighbourhood services meant staff offered a service, where he might expect to be offered assistance. Now the 'job' falls to him revealing the absence of services to be a greater loss to him in older age.

In the absence of the wider relational neighbourhood caring, his diminishing capabilities come to the fore. No longer able to count on services to care, Sisi senses his vulnerability. On this day, anger springs forth in response to a lack of considerate care. Emotions announce our mood, they are primordial, there beyond our control. Even if the mood is suppressed, "understanding always has its mood" (Heidegger, 1996/2008, p. 182). His mood reveals an already present understanding of not mattering. Nobody comes to assist, nobody responds with considerate care. Sisi is just another user of the petrol station, possibly just another old man who does not belong in a 'self-service world'. His anger reveals the indignance of being assumed old and unaware of what is happening around him. The incongruence of their assumptions with his sense of being intelligently aware propels Sisi to show 'them' what capable looks like. Sisi understands *they* assume he is incompetent; possibly an assumption 'they' have of all older adults. The 'they' is not the staff but the "'they' constitute(s) what we know as 'publicness'…what has thus been covered up gets passed off as something familiar and accessible to everyone" (Heidegger, 1962/2008, p. 165). The averageness of a public understanding of older adults assumes deficiency. Demanding they take notice of him, he *drags* 'them' out of their indifference, to look and take notice of, *me*, the person. Assuming deficiency, 'they' were jolted into noticing him, possibly for the first time. Anger reveals unreadiness for the ordinariness of a neighbourhood that lacks caring.

Being *treated well* suggests Sisi experiences considerate care by the staff; of being assisted in ways that are helpful. On this occasion, Sisi has the strength to keep going, demanding service. This time his anger calls him beyond a sense of self-doubt and he is able to go about his day. But will he have the strength to quell self-doubt the next time? What will happen when he is no longer capable of persisting through self-doubt? Thus, doing what he does with 'some difficulty' is keeping going in the face of a neighbourhood of indifference. Neighbourhood participation announces itself in anger.

Stephan offers another perspective of being capable that involves planning ahead and allowing time to keep going.

> *Last Friday I drove on my own to language class. I belong to the Dalmatian Cultural Society and we're learning Serbo-Croatian language classes. I was born in NZ but we spoke Serbo-Croatian at home. I'm not as good as I was but there are ways of managing your faculties. I'm studying the grammar to keep my brain active. I'm finding it difficult but I am quite enjoying it. Before I left home I thought about the way I'll go; the signs to look out for and how many traffic lights…that sort of thing. I have to plan the route. I left home in plenty of time to get into the city before the class at 8pm. Most of the rush traffic is over by that time but it's still busy. I drove through Ponsonby so I was reminding myself to get in the left hand lane and quickly looking out for the sign. I've got to be looking ahead, that's all so my eyesight will trigger the brain. My eyesight is fine but it's what is conveyed to the brain. I got there without any problems and found a park outside the building.* (Stephan, 88)

Capable of learning has brought Stephan toward studying a language, one that has special meaning for him. He talks of re-learning his first language as a way to *keep my brain active*. Attending language class not only helps hold on to his 'faculties' but it is holding on to his heritage; holding his past in the present. Speaking his childhood language brings his cultural heritage forth into everyday life. He thought his earlier memories had gone but in learning and speaking his home language he is thrown to remembering his mother speaking it, he is remembering stories his mother spoke of her life in her home country and recalls his childhood in this country. Stephan's remembering is the still-present-at-hand past that is influencing his everydayness. Gadamer (2004/2013) noted that history is who we are as humans; thus, participating in his cultural club shows Stephan retrieving his history for the sake of holding onto who he is in everydayness.

Understanding *I'm not as good as I was* Stephan strives to hold on to his capabilities by regularly involving himself in neighbourhood activities. What was once automatic now calls for conscious attention to *manage your faculties*. By referring to the generic 'your' suggests he is normalising the deliberately considered actions he must take to be able to keep going, suggesting this is just how it is for everyone who's older. No longer able to just do things intuitively, Stephan describes how he must *think about* how he does what was once habitual. Having driven all his life Stephan might once have simply got in the car and driven. Today he can no longer rely on himself to drive in *busy traffic*. What falls silent is the detail of what he encounters in the busy traffic. Awareness of movement; a great deal of movement, fast, sudden, and unpredictable movement shows concern for what driving amidst city traffic throws up for his ability to respond. Neighbourhood participation announces itself as concern for 'managing' his abilities.

As Stephan speaks of 'not being as good' as he was, so too others tell of their concern for capableness slipping away. Managing his diminishing capabilities calls for Stephan to take his time. Stephan reveals a sense of being responsible and accountable by allowing time for his *eyesight to trigger the brain.* Noticing the signs he must look out for, the number of traffic lights he must count along the way, and anticipate where he might park, helps him find his way and navigate the traffic. He embodies the route in thinking, seeing, and doing what must be done for the sake of being responsible. Being an older driver, Stephan brings into focus the importance of what he does for the sake of keeping going as a driver. The possible consequences, if not, are great for future participation.

Losing access to their car is a constant threat to older adults. "Travel by car is central to the way people pattern their lives, where they decide to live, how they develop their social networks, the way they access services and how they interact with their communities" (Gardezi et al., 2006, p. 19). This perspective suggests not only the relationship to space and to others but also the relationship to oneself (Lord, Després, & Ramadier, 2011). These relationships contribute to a sense of personal identity and neighbourhood attachment that have been created over many years and lets the older adult live the life he/she chose and maintain social connections.

The participants all recount this sense of living the everyday as capable but not as capable as they remember themselves. Degnen (2012) distinguished these as two 'selves' that she calls the 'remembered self' and the 'inhabited self'. Both selves

are an embodiment of capableness in the everyday. She identified that each 'self' serves a different purpose in the course of everyday life. The remembered self serves to draw our attention to the significance of the self as something with a life-history that can be drawn down during the course of everyday life. The inhabited self is that which is experienced immediately and directly and the self, which one sometimes turns away from.

Persevering

Determined to keep going is to persist with doing what is still possible in a resolute manner.

In the telling of her walk up the hill, Eileen's determination to keep going is evident in the need to use three stops for recovering sufficiently to keep moving forward.

> *It was Wednesday, that's when I do my fruit and vegetable shop. So I walked up there to the local fruit shop. It takes three stops to get there. It's because I run out of puff. But, I have to keep my legs moving so I walk up the hill. It's good for me. I walk down the walkway and then start up the road to the shops. I stop at the bus stop and have a rest and everybody turns around and says, 'are you catching the bus?' I say, 'no, no. I'm waiting for the rest of me to catch up.' I have my rest there and then I carry on up the hill. There's nowhere to sit after that. I just stand and as I said, I wait for the rest of me to catch up. Then when I get to the top, I have to sit on the wall of the little garden, just around the corner. I sit there and watch the traffic going by until I get my breath again. When I've got enough oomph to get me across the road I go over to the lights. There is a little seat outside the church. Yesterday was a fine day so I could sit on the seat and I say 'hello' to anyone who said 'hello' to me, but I didn't have much breath to talk. I just watched the cars drive by.* (Eileen, 90)

It is Wednesday and Eileen walks to the shops every Wednesday. Eileen could take the bus up the hill but instead, she commits to walking the hill every week. Being in the routine shows what she has always done and what she must keep doing. Understanding that being mobile is what lets her hold onto everyday living as she knows it, she determines to *keeping her legs moving*. Its familiarity lets her keep on committing to its challenge for the sake of keeping mobile. While the errand gives her a reason to be in the neighbourhood today, it is determinedness to keep walking

that keeps her going. Being older may bring a greater importance for keeping the familiarity of everyday life going.

The hill *gets to me most* suggesting it is just one of a number of mobility challenges she ordinarily faces in the neighbourhood. The hill captures what is an everyday challenge of walking in the neighbourhood. 'It' illuminates an uncomfortable embodied ordinariness of being *out of puff*. Walking in the neighbourhood calls for *oomph*, possibly everyday calls for more effort to walk than the last. Familiar with what walking the neighbourhood calls for, she anticipates how she must *wait for the rest of me to catch up*. Waiting reveals how she is always already pushing herself on and beyond breath. Stopping and waiting to catch her breath lets her keep going until the next moment when she will wait and re-capture herself. Pushing onward, determined to keep going Eileen stops and waits for her 'oomph' to return. The stop/wait pattern closes the space between one 'stop' and the next. Moving forward she looks toward the next 'stop' marked by familiar landmarks; the bus-stop, a lamp-post where there needs to be a seat but there is not, the edge of the stone wall against which she can lean, a bench-seat on which she can sit. The 'stops' are on-hand, ready and able to be used for resting and recovering. The unready-to-hand seat midway up the hill is noticeable in its absence. She does what she usually does to recover in the familiar place with no seat, illuminating how keeping going is using familiar skills to do familiar things in familiar places. However, the unready-to-hand things 'stand in the way' of concern for keeping going.

Marj speaks of the little things that make it hard for her to keep going:

Everybody thinks I just sit here doing a bit of gardening but there's always something. The other day I had to go up to the optometrist. It's the third time I've had to get the side bit on my glasses fixed. That's another $52. And the bus ride up there. Then yesterday I went to the supermarket and discovered my wallet missing. I tried to think where the heck I could have left it. I phoned the library but they didn't have any wallet handed it. I phoned the dentist because I'd been there on Tuesday, but it wasn't there either. I looked through every part of the car but it wasn't there. I thought 'that's strange' because everything else was in my bag. I waited for a couple of days thinking 'surely it'll turn up'. But 'no', so I cancelled my cards this morning. That was a business – I cancelled my credit card, the HOP card, the Age Concern card for taxis and my driver's license which I'd just renewed 2 weeks ago. I've got it till I'm 90 if I make it. That seems old. And I have to

go through the whole bloody business of getting a new HOP card. I remember the terrible time trying to get it the first time. It took me three goes. I remember phoning up to find out what had happened to it and the girl said the photo was done on the wrong side of the Gold Card. I had to go through the whole bloody thing again. So this time I phoned them about a new card and they said they don't keep anything on record, not even the photo. I find what's hard is juggling lots of little things. It's not the big things but lots of little things that are frustrating. (Marj, 89)

Losing her many community cards reveals the many neighbourhood services Marj uses in the everyday. Drifting along in the certainty of being able to do this or that in the neighbourhood, Marj takes the cards for granted. The sudden discovery of the missing cards causes disruption to her everyday. The uncanniness of being unable to participate in everyday neighbourhood activities shows Eileen lost, unable to be doing what she ordinarily does. She has 'fallen' into the day lost to its *strange*-ness. The disruption reveals the taken-for-granted and un-noticed participation as the many little things that she does to keep going. From a Heideggerian perspective, "Dasein does not lose itself…it does so by 'falling concern'…so that it forgets itself as an autonomous entity and interprets itself in terms of its current preoccupations" (Inwood, 1999, p. 23). Bothered by the missing cards Eileen falls into a sense of helplessness.

Not having the choice of when and how to participate Eileen appears vulnerable to the things she cannot manage. The cards reveal themselves as vital to gaining entry to neighbourhood services and facilities necessary for participating in everyday life. Her words *the whole bloody business* suggests a powerful sense of being overwhelmed by systems and processes. Eileen faces the possibility of not being able to keep going with ordinary neighbourhood involvement, revealing that what matters is being free to choose when and how to participate. The everydayness of participation shows itself in its freeing ways.

Marj experiences the lots *of little things* in her every day as a *juggle*. The metaphor of juggling points to many things in play at any one time; each of equal importance to the 'performance'. The relentlessness nature of juggling shows it is hard work. Paradoxically the invisible eyes of *everyone* who see her *just sit here* appearing to 'do' nothing shows concern for what 'they' do not see. Her indignance reveals the incongruence between how others assume her to be doing nothing and

how Marj understands herself. *Finding it hard to juggle the many little things* suggests fear of dropping a 'ball'. Fearful of the day when she can no longer 'juggle' the many things of life shows the fragility of the balancing act that is her everyday life. Working hard at keeping the everyday in play is for the sake of being autonomous. Thus, keeping the everyday going calls for perseverance in the face of its many difficulties. Everyday neighbourhood participation is being vulnerable and pushing through what at any moment could threaten to overwhelm.

Taking Care

Taking heed of what threatens is a way of keeping open the possibility of 'making it'.

> *I walk down the hill to the supermarket. I pull my shopping trundler behind me and down the hill I go. It's good when I've got my wee trolley and my stick. I've got something to hang onto. I'm well anchored, you know. But still, I have to take great care. I'm always frightened I won't make it when I step from the curb onto the road. I walk along mostly with my head looking to the ground because I'm quite nervous about falling. I've got to be so careful that I don't fall. When I get to the supermarket I take the steps, one at a time. I don't leap up. I make sure I have both feet on the step before I take the next step. I must look pretty helpless because people offer to help me. The other day this young man offered to help me up the steps. There was a time when I would have said I could manage fine, but I don't say that anymore.* (Jess, 90)

Jess begins telling of her ordinary walk with a tuneful *down the hill I go*, as though she were setting off with a skip and a hop on a *wee* adventure, such is the apparent ease with which she speaks of the walk to the supermarket. In telling of this walk, Jess attunes to things around that threaten her balance. With eyes cast to the ground, she is always looking for what threatens her balance. Before setting off on her walk Jess already fears that something harmful awaits her. Attuned to her surroundings Jess is fearful of the possibility she *won't make it*. Intent on completing the task of shopping and returning home, Jess anticipates something will get in the way of her doing it. When once she would *leap up*, she can no longer trust her body to be balanced and sufficiently strong for what walking in her neighbourhood calls for. Wary of steps, curbs, and sloping pathways yet to be encountered, Jess heeds them as threats that call for careful attention to balance and strength. Noticing changing levels is being ahead of herself, ordinarily *taking care*. Taking care reveals

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fearful anxiousness. Heidegger (1962/2008) considered fear is not based on knowledge of a threat but rather "I see the threat only because I fear it" (p. 84). Heeding curbs and steps as threats to her ability to '*make it'*, Jess is always taking care. Taking care is heeding what ordinarily threatens her mobility; always already attending to balance and strength to avoid falling. Taking heed of what threatens shows itself as a mode of taking care.

Walking downhill she understands herself capable of the walk and yet her taking care attracts offers of help. In the moment, she sees herself through the eyes of others and sees *helpless*. To Jess the steps announce being helpless; to the other, the steps announce a need for help. "The that-it-is of facticity never becomes something that we can come across by beholding it" (Heidegger, 1962/2008, p. 174). Interpreted here, taking care cannot be understood only by how it appears to others but it is experienced in the ordinary everyday living of life. Amidst the neighbourhood, Jess experiences the concern of others while taking care to manage herself. Once able to *manage fine*, her managing today appears to appeal to others for assistance. Managing is "it's 'there' in such a way that, whether explicitly or not, it finds itself in its throwness" (Heidgger, 1962/2008, p. 174). Thrownness is the experience of having something that is always already there disclosed to us. Throwness reveals Jess' concern for not managing; for helplessness. This is not to say that she is any less capable in that moment than the previous moment or indeed the future moment but that she is toward the possibility of helplessness. Understanding that she will ordinarily accept help, is to be 'managing', thus what appears in the everyday is her need for assistance. Her acceptance reveals the congruence of how others see her and how she understand herself; yet Jess knows what she is capable of. She experiences herself as taking care; care-full to keep open the possibility of 'making it'. Carefulness for self-management is a mode of taking care.

Taking care requires understanding, attunement, and absorption. Understanding what threatens to unbalance, Jess has fallen into noticing hazards. Dreyfus (1991) interpreted Heidegger's notion of fallness as being caught up in the "general situation", doing almost automatically what one is there to do, doing "what typically makes sense" (p. 320), but without awareness of what causes concern. In falling, Dasein loses itself "among his makings and doings...the things with which he is busy" (King, 2001, p. 13). Absorbed in everyday matters, attuned to things that

threaten her balance and understanding the need to take heed, Jess illuminates taking care for the sake of fully participating.

Taking Risks

Joan speaks of getting around the neighbourhood as a *hell of a job*, revealing it as risky business. Living with decreasing physical abilities, she must take risks to keep on keeping on. Taking risks offers another perspective of taking care that involves moving toward the threat as a threat.

> *I took the bus to Takapuna. When I came to get off, I had a hell of a job because the driver parked away from the curb and there were people getting on the bus while I'm trying to get off. I've got wonky hips so it's not so good. I didn't have to wait long for the second bus which was good. I sat up there enjoying the ride. The bus stops opposite the clinic. I didn't bother going down to the traffic lights. I risk it and just cross straight over. I go as quickly as I can because the cars whizz along there. I'm very careful because with my bad eyes, I can't see how close the traffic is. My left eye is dead and my right eye only half sees. But I can still see. I have to be careful stepping off the curbs because they're the same colour as the blimmen road.* (Joan, 89)

The *hell*ish-ness of taking the bus ripples throughout this ordinary event of moving about the neighbourhood. Joan uses the bus as a matter of course. She has always used the bus and continues to use it in the everydayness of life. Her familiarity with the local bus schedule, its routes, and swiping her bus card giving her free entry, fall silent as she tells of this event. It is just what she ordinarily does. Encountering its hellish-ness is to see what threatens her everyday participation in the neighbourhood; stairs, shared pathways, the inconsiderateness of others. The ordinariness of neighbourhood mobility shows itself as hellishly difficult. Joan makes sense of this hellishness by giving an account of her physical limitations. Her 'wonky' hips, poor vision, and limited energy are always with her in these everyday encounters. Encountering the upward rush of people as she descends the bus steps and the divide between the bus-steps and curb, Joan is concerned for making it to the footpath without falling. Noticing the hard work of getting around the neighbourhood shows concern for the possibility of the day when things threaten to overwhelm her; when it becomes too hard to keep going. Neighbourhood participation is announced in its hellishness.

Taking the risk is a moment in what is an overall risky business of getting about. Understanding that she should use the pedestrian lights to cross the road Joan sees the distance to the pedestrian lights is too great. In the moment, she makes the only decision possible and crosses the road directly from the bus stop. Out of necessity, Joan will *just cross straight* over in a mode of 'just' doing what she determines she must do with the energy available to her. With limited ability to see cars approaching at speed and the curb that is *the same colour as the blimmen road* she is cognisant of the dangers posed by crossing the road. Joan understands that her actions require *risk,* in a mode of 'risk' dwelling in the shadows of all that she does in the neighbourhood. The ordinariness of taking risks has a matter of factness about it suggesting she does not dwell upon risk, but rather she is facing its inevitableness. Neighbourhood participation is living with everyday risk for the sake of keeping going.

Joan's constant reference to 'I' and 'me' shows her aloneness in the neighbourhood. Taking the risks alone Joan understands that her skills alone are what keep her doing what she does in the neighbourhood. Determining herself capable of seeing she takes time to *look*, and contrary to what she says about not *bothering*, Joan appears concerned about the dangers of getting about the neighbourhood. Taking heed of the risk and 'just' doing what she determines necessary is a mode of managing herself. Pushing through what might feel too hard is how Joan maintains a sense that she can do this. Compelled to take risks is a way of keeping going. "Dasein 'is' essentially for the sake of Others. Even if the particular facitical Dasein does not turn to Others, and supposes that it has no need of them or manages to get along without them, it *is* in the way of Being-with" (Heidegger, 1962/2008, p. 160). Interpreted here, Joan supposes that taking care is what she does alone but the significance of encountering cars at speed *is* being-with. The danger to her and others is Being-with risk, illuminating its ordinariness. Striving to keep going with everyday matters, is dwelling with risk. Thus, the meaning of neighbourhood participation is dwelling with risk for the sake of pursuing life matters.

Having Purpose

Having a part to play showed in conversations with participants. Jim's story shows how having a role to play is a mode of keeping going in the face of reduced capability.

Last Wednesday I went to my Lodge meeting. First Wednesday of every month. My doctor advised me not to give it up. He said, 'it's your main communication with the outside world'. And I believe he was right. It keeps me in contact with my friends. I like going because I can talk with my equals. They're men from all walks of life. My rank is Past-Master so I sit in the reserved seating, if I so wish. I used to always get up and talk. Never bothered me, but I don't do it anymore. I'd say I'm the oldest in our Lodge, but my friend who drives me there, he's 91 years old. He picks me up just before 7pm and I'd say I'm home by 11pm. It's a good night out. I'm expected to know every word from memory but I'm afraid that's fallen by the way. A man gave a talk at our last meeting but I hardly heard a word he said. It was frustrating. It's my hearing. Still, it's a good night. My friend who drives me called a couple of days ago to say he fell and broke a few bones. He can't drive at the moment so I don't know how I'll get to our next meeting. (Jim, 93)

Jim attends Lodge meetings once a month as he has done for 70 years. The date is etched on the calendar and noticeable for it being the only event routinely appearing on his calendar. Its regularity assures him of a monthly outing where he can anticipate being with others, making it a highlight of each month. In conversation, Jim makes apparent his aloneness, showing the Lodge as the one constant point of connection with *the outside world*. Jim is experiencing his many losses as a world that is slipping away from him. Attending the meeting is concern for holding on to relationships in his world in a mode of keeping going. Being–in-the-world is always a being in relationship (Heidegger, 1962/2008). Understanding the relationship as one of familiarity, of being known by and knowing each other as 'brothers' of a fraternity, Jim knows these men as *friends*. Being-with friends in this way, he knows himself as an *equal*. Experiencing himself amongst his 'equals' reveals something of his experiences as an older man participating in other neighbourhood relationships; possibly less than equal. Jim understands that he is not able to contribute equally and yet he is at one with them. Being-with his friends is a comfortable mode of being-with others. His club friends are men he has known for more than 70 years that shows being-with through relatedness which endures. Being-with for the sake of friendship is a mode of having purpose.

Participating in the meeting, Jim notices his diminishing capabilities for taking part as a club member should. No longer trusting his memory for the verses to be recited appears to him as *falling by the way*. Continuing to participate is made

possible by 'falling' back on the comfortable familiarity of the rituals. Jim 'knows' what to do and he does 'it' in the mode of habitual knowing, that lets him continue to take part. In saying that things are 'falling back', Jim's perseverance to keep going is revealed. How things really are contrasts with his expectations for how he should be remembering the verses and hearing what is spoken. Jim's understanding of how he should be participating at the meeting does not appear to involve the reaction of others to his failing abilities. Being there as a senior member he expects to be regarded by the other members for his senior status. Holding this status frees Jim to experience the solicitous care of the members. From a Heideggerian perspective solicitude as 'care' is a concern "for the Other as "*leap ahead*" of him in his potentiality-for-Being... not to a "*what*" with which he is concerned; it helps the Other to become *free for* it" (Heidegger, 1962/2008, pp. 158-159). Rather than others stepping in for him, he is free to participate fully. Expecting to be respected for his seniority is to understand he is accepted regardless of what he can and cannot do. "By the very nature of expecting, the possible is drawn into the actual. Expecting…is essentially a *waiting for that actualization*" (Heidegger, 1962/2008, p. 306). Jim's understanding of how he will be received by others at the meeting is realised for him. Being-with the others is Jim's need for having a role to play and being free in that role. Thus having a part to play and free to play it, is being-with purpose. Until now, he has relied on his friend to drive him but his involvement in next month's Lodge meeting is uncertain. If he can no longer be involved because he has nobody to drive him to the meeting what will give purpose to his days? Keeping-going is holding on to the possibility of an everyday with purpose while sensing uncertainty. Everyday participation is a delicate balance of having and losing purpose.

Summary

Bringing together the stories that illustrate 'keeping-going' with everyday matters of life in the neighbourhood illustrated qualities of persistence and perseverance. 'Keeping-going' has its origins in watching and noticing with careful attention to that which threatens capabilities for continued neighbourhood participation. Keeping-going is a mode of encountering what is 'ready to hand' in the face of diminishing capabilities. While understanding that they are 'not as good' as they were, *perservering* shows the relentless drive to push through in the face of the many challenges that threaten to disrupt being autonomous. *Taking care* involves heeding

things that threaten ability to participate; while *taking risks* is committing to a risky course of action because that is what the situation calls for. Regardless of limited ability to participate, *having purpose* lends itself to keeping going.

The drive to keep going is a commitment to being responsible for oneself, for being autonomous in the face of a world that is becoming more difficult. Determined to hold onto what they are capable of doing is a mode of being responsible for self. Where Heidegger talked of 'concern' these participants speak of being autonomous, being careful, being responsible, being capable. Encountering a neighbourhood that lacks consideration for its older residents is to experience it unready-to-hand. When the neighbourhood is present-to-hand and ready-to-hand, then the older resident is able to keep going because everything that is there to support his/her participation is on-hand, ready and able to be used. When concern for participation can be acted out in its fullness, the neighbourhood is not noticed and older adults experience freedom to participate in the way they choose. Keeping-going is a mode of everyday neighbourhood participation.

Chapter Eight: Discussion: Participating in the Spirit of Neighbourliness

> To have lived...as a person is to have taken my proper place in the social world that lets us make selves of each other. (Lindemann, 2014, p. 159)

Introduction

This study set out to examine the original research question 'what is the everyday experience of urban neighbourhood participation of adults 85 years and older?' and how these experiences inform age-friendly communities in relation to the 'thing' that is neighbourhood participation. Because the hermeneutic circle is an ongoing to-ing and fro-ing between knowing and unknowing, the understandings cannot constitute a full and complete meaning of neighbourhood participation. What I offer is a synthesis of my interpretation of the participants' stories and the findings from the literature that is one of many possibilities of the meaning of neighbourhood participation.

Previous chapters have outlined the focus on older adults' participation as a central tenet of international and national public health policy agendas. I presented the WHO age-friendly cities and communities framework as a nexus of public health and urban planning for healthy, sustainable urban neighbourhoods. A review of empirical research findings indicates the potential benefits of planning age-friendly neighbourhoods to support participation of older adults. However, I identified a paucity of research of the everyday lived experiences of adults 85 years and older participating in urban neighbourhoods. Accordingly, I presented my reasons for determining a phenomenological approach as the methodology of choice for this study. Three themes emerged from the findings of this study that capture the meaning of everyday neighbourhood participation for adults aged 85 years and older.

In this the final chapter of the thesis, I begin by summarising the key findings then discussing the key findings in relation to the gerontological and age-friendly literature. I will then follow with implications for policy, nursing practice, education, and research. Finally, I will reflect on the methodological approach deployed, then limitations, followed by a concluding statement.

Summary of Key Findings

The findings were presented in chapters five, six, and seven, and focused on presenting three notions and associated sub notions. The first theme, *holding-on to*

the everyday as participating captures the notion of dwelling. Through everyday living with neighbourhood, the older adult continues with familiar patterns of doing things imbued with meaning. Neighbourhood participation shows itself in the comfort of dwelling in ordinary ways. The second theme, *being neighbourly as participating* aligns with values of caring and connectedness that reflects a concern for being in relationship with neighbours. In other words, a neighbourly neighbourhood. Being neighbourly reveals qualities of neighbourhood participation. The third theme, *keeping-going as participating* captures enduring personal qualities that make it possible to be autonomous in a world that is becoming more difficult. From a Heideggerian perspective, the neighbourhood is 'un-ready to hand' for these older adults to be involved in the neighbourhood in their preferred ways.

Drawn out into the neighbourhood these older adults involved themselves in a range of activities, doing what they have always done. However, within these stories they showed something more than the pragmatic activities of involvement. Neighbourhood participation included both activities and ways of being that kept them ordinarily involved. What and how they usually participate reflects a continuation of self, based on prior life experiences. These reflect what is posited by continuity theory of ageing in that older adults try to maintain a continuity of lifestyle by adapting strategies that are connected to their past experiences (Atchley, 1989). They showed that everydayness of neighbourhood participation matters.

The Spirit of Neighbourliness

The study focused on the everyday ordinary ways older adults are participating in the neighbourhood in order to grasp the 'thingness of the thing' that is neighbourhood participation. The thing in itself is neighbourliness. The thing that is neighbourhood participation is "its 'there' in an *everyday* manner" (Heidegger, 1962/2008, p. 171). The participants hold 'it' in their hearts and in their memories. It is the way the older adults in this study go about doing things that bestow a quality of everyday living upon the neighbourhood. In its ordinariness, they gift in the spirit of neighbourliness.

I will draw us to the Latin origins of the word spirit, *spiritus* meaning, "breath, inspiration, breath of life, hence "life"; also a disposition, character" (Harper, 2001). The spirit of neighbourliness shows itself as ways of being neighbourly that harks back to the past, showing qualities and character for urban neighbourhood living in the present, and possibilities for breathing life into future

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urban neighbourhood living. The gifting of neighbourliness is to be understood as that which is given for us as humans to experience and value in everyday life.

Neighbourhood participation lies in everyday being neighbourly; being-with in a communal or public way. "Everydayness is a definite '*how*' of existence… [and] is 'manifest' in the "with-one-another" of publicness" (Heidegger, 1962/2008, p. 422). It is more or less familiar to any individual. The familiarity of being a neighbour assumes a taken-for-granted meaning of what it is to be neighbourly. Heidegger helped with understanding the origins of neighbourliness in his claim that our identities are always formed within a pre-existing community; thus, people are always simultaneously individual and community (Stroh, 2015). Interpreted here, the way of being neighbourly is to identify as a neighbour of this neighbourhood. Everyday neighbourhood participation shows itself in the ways of being in relationship with others that is neighbourly. Dasein as such exists only in being 'lived' by us as our 'way of life'" (Haugeland, 2013, p. 82). In this sense, we can think of neighbourliness as a way of living embodied by people. Since the existence of neighbourliness depends on people practising it – it is capable of death. For instance, a language that is no longer spoken becomes a dead language. These older adults practice neighbourliness in the everyday way in which they go about life. They are keeping it alive, although it might easily go unnoticed and its value unrecognised. This study shows the nuanced ways these older adults are going about things that keeps neighbourliness alive.

The neighbourhood constitutes people. It cannot exist without people living in it. The opposite is also true; individual people must always act from within the context of their neighbourhood. Thus, even when an individual is alone, he/she is still living as one in his/her neighbourhood lives when one is alone. A "case of Dasein" is an individual member whose belonging in the community is founded upon his or her sharing in that particular collective understanding of being (Stroh, 2015, p. 245). It is being with others, circumstantially understood as being concerned for others. Willing to live and act communally as neighbours the older adults in this study know themselves as neighbours, whose existence ought to be for others. They do things for others whether it is to go looking for a neighbour's wife who has wandered and become lost, or taking time to chat with a passer-by. This is how they show concern for others. As Heidegger (1962/2008) noted,

Being for, against, or without one another passing one another by, not 'mattering' to one another—these are possible ways of solicitude. And it is precisely these last-named deficient and indifferent modes that characterise everyday, average Being-with-one another. (p. 158)

Heidegger continued to note, therefore, it is true that being with others our everyday interactions with others must constitute at least some form of concern for others (solicitude). However, since our absorption in the world covers up the full extent of our interrelation with other people, this form of considerateness must be considered deficient. These older adults experience not mattering in the neighbourhood where people pass by indifferent to each other. Holding neighbourliness they are open to interacting, if only for a moment. This way of everyday being in the neighbourhood is how they show considerateness for human responding, one person to another.

How neighbourhood relatedness matters for these older adults inheres in past experience of neighbourhood caring. Being neighbourly is a way of relating with neighbours that opens itself to human responding; one person to another. Understanding the world of self-service as one where caring is deficient, these older adults care about the provenance of neighbourhood. They speak of powerful memories of a neighbourhood with caring relationships. Such nostalgia may be selective remembering. Nevertheless, their remembering evokes images of belonging, local friendship, safety, helping each other and a village-like environment. This is how they account for what is lost in their everyday. Embodying neighbourliness in friendly gestures, they wave and greet anyone who might pass by with little expectation of a response. In their own way, they are protecting a way of human responding, that attends to the existence of others with their solicitous care and prejudices. Sensing what is lost, these older adults do what they can to bring a spirit of neighbourliness, gifting a way of being in the neighbourhood. Protecting the humanness of neighbourly living showed that for these older adults being in relationship matters.

Protecting the value of neighbourliness, these older adults give service. They are ready to respond to a call for a help, to give a hand, to do their bit in whatever way they can. Noticing who needs help, they respond in a spirit of neighbourliness. In contrast to societal concern for the 'burden' of older adults as recipients of services, they are still giving service. Contributing as neighbours, whether as volunteers or helping family, putting out a neighbour's rubbish or dropping a meal to

a sick neighbour, it is willingness to do what they know they can that is being neighbourly. Policy emphasis on civic participation fails to capture the contribution of neighbourliness toward creating a supportive neighbourhood for people of all ages. Neighbourliness strengthens individual social connections and neighbourhood connectivity (De Donder et al., 2013) in ways not recognised in health policy. The value of a supportive social environment is recognised as possibly helping to compensate for or even counteract some of the individual pressures or vulnerabilities experienced by older adults (Smetcoren et al., 2018; Thomese, Buffel, & Phillipson, 2018). Holding the spirit of neighbourliness, the older adults are showing commitment to supporting existing neighbourly networks for the sake of neighbourhood connectedness. As a human way of living, neighbourliness inheres in neighbouring.

The connections between these older adults and their neighbourhoods are tenuous, reflecting change over time as competence levels decline and as neighbourhood environments change. The majority (60%) of these older adults have lived more than 45 years in their neighbourhood while 87% have lived more than 20 years in the same neighbourhood. They have lived through many changes within their inner city neighbourhood. Remembering strong neighbourhood connections, they now lack neighbours in their support networks, and their connections show weak relational ties. While these participants do not talk of isolation and its corollary, loneliness, it is there. The loneliness is in their weak ties with neighbours and in the absence of family and friends who have gone. The absence of neighbourly ties or bonds is the point at which the individual loses we-ness of neighbourhood bringing into existence their I-ness. The study text uses of *I* and *me* suggests these participants are often alone in the neighbourhood. The distinction between aloneness and loneliness is easily blurred for older adults who spend proportionately more time alone and who have smaller social networks. With no body around to chat with or pass the time, they have lost the 'community' of neighbourhood. The neighbourhood is no longer vibrant. The aloneness of everyday neighbourhood living reveals the need for greater opportunities to be interacting with others. Organisational commitment to supporting existing neighbourly networks and initiatives is needed to shift public health policy from care, frailty and burden to enhance a caring and social age-friendly neighbourhood (Smetcoren et al., 2018; Thomese et al., 2018).

Having somewhere to be

The humanness of being somewhere is to be amidst the wider world. Whether sitting on the porch, chatting at the letterbox, or walking along the street, it is having somewhere to be in the world of neighbourhood. Participants spoke of being compelled to go into the neighbourhood. A key Heideggerian insight that helps with using common terms such as 'place' and 'neighbourhood' is that there is no 'being' separate from our 'world'; our existence is always 'being-in-the-world' (Heidegger, 1962/2008, p. 65). The ontological state of being-in-the-world is one in which we are always involved with it and participating in it, even when it feels lonely. In terms of this study, it is how these participants are connected to the neighbourhood regardless of what they ordinarily do (or not) or with whom. Being there, watching and noticing who is doing what, is how they hold on to the everyday patterns and rhythms of the neighbourhood. Being amidst nature they observe the changing seasons, they look to see that the tui [bird] is there today. Being somewhere in the neighbourhood, they experience its worldliness. While the focus of policy and gerontological literature is on physical or social participation, these participants, seemingly inactive, are sitting and noticing everyday life of the neighbourhood. While they do not expect to be noticed they are uplifted when noticed; they do not expect to talk, yet they are uplifted when hearing their own voice in reply to someone. For those living alone, being somewhere is to be seen and heard; to exist to someone. Watching and observing, as a way of being neighbourly, reveals the importance of neighbourhood places for having somewhere to be alongside others.

Gathering shows another aspect of neighbourliness. Informal gathering happens in shared spaces. Shared or 'third' spaces offer opportunities for interacting with others, free of obligation, increasing the level of social support with neighbours (Seaman, 2012). Consistent with other studies (Gardner, 2011), a variety of locale were identified as gathering places in this study including the bus-stop, café, library, bench-seats, local park, and the letter-box. Gathering reveals ways of being neighbourly; in conversation, sharing information, being playful and free to come and go. This study supports an earlier study that inclusive public spaces where older adults feel a sense of ownership and belonging provide opportunities for socially participating, even for a moment (Gardner, 2011). Shared places invite lingering, anticipating opportunities for connecting with others and maintaining relationships. For the older adults in this study, gathering did not involve younger people; showing

older adults excluded from intergenerational interaction in inner city neighbourhoods. There has been a long history of exclusion in the design of places based on income and ethnicity that has limited a neighbourhood's ability to thrive (Gidigbi, 2018). These authors argue that making shared spaces is a process involving those who currently live there. Even though certain spaces should be designed to encourage a certain kind of user group through designed 'ownership', the outdoor environment needs to support a diverse community and provide neighbourhood spaces that encourage or increase the opportunity of sociability and greater neighbourhood cohesion (Kaźmierczak, 2013). That means spaces inclusive of adults in their 90s. Adults in advanced age need to be involved in making inner city neighbourhood spaces inviting, so that they are able to participate along with people of all ages. This study supports previous research in identifying the physical attributes of gathering places that includes convenience, accessibility, and usability. When there are easy and inviting places for older adults to be, they will be drawn to inhabit them.

This study throws a light on the importance of ambience. The mood that invited these participants to participate was lively with chatter; yet still able to hear and participate in conversation, where they could move freely, and sit, and a casual focus of connection that welcomed involvement without obligation. There is some evidence that shared or 'third' places are changing, for example, where once the house porch offered connection with the street, for these participants the bus-stop appears to have become its replacement. Socio-economic situation of older adults may influence preferred shared places for socialising. For example older adults on low income and living alone preferred socialising in community centres (Berg, Kemperman, de Kleijn, & Borgers, 2015). The survival of gathering places for older adults identified in this study are threatened with extinction. An inner city neighbourhood post-office, park, or library welcoming of older adults, are gathering places threatened by a world of fiscal constraint and competing urban development agendas. While gathering places change, the desire for gathering continues. Further, where older adults are invisible to inner city neighbourhood planning, they will be excluded from possible planning for shared spaces. It is reasonable to expect that the loss of such places might potentially contribute to isolation and loneliness of older adults.

Research supports neighbourhood streets as important shared places where broader, more casual interaction can occur. Streets, designed as places for people, provide social opportunities and contribute to vibrant neighbourhood street culture. Older adults are less likely to socialise in shared spaces than younger people and when they do use streets and parks, it is more likely to be in low density neighbourhoods (Berg et al., 2015). The participants in this study speak of their inner-city neighbourhood streets offering little or no sociability. The streets appear merely as traffic lanes. More than the unsociablity of the neighbourhood, these older adults experience being in the way. Sharing the pavements with cyclists and pedestrians at speed, battling against the rush of bus users and being hurried by the rush of traffic at speed, is moving slowly in the fast 'lane' of life. Younger people do not always welcome the slowness of old age. Urban planning concerns for efficiently moving people and cars, focuses on a continuous flow and movement that show little regard for the needs of older adults to slow down, rest, and pause. Designing for efficiency is most suited to task-based walking activity, for example, walking to catch the bus, to do the shopping, a mode of walking not inclined to sociability (Nation, Fortney, & Wandersman, 2010; Trudeau, 2018; Wilkinson, 2007).

Phenomenally, participation in older age can be understood in terms of what and how older adults are being in the neighbourhood. Sitting, pausing, lingering watchfully, noticing what is there for noticing, these participants showed slow ways of being in the neighbourhood. The slowness of age serves as a reminder that neighbourhoods are places for living and not merely transit corridors. Slowness supports earlier research that adults over the age of 80 years cannot walk the speed needed for crossing pedestrian lights (Asher, Aresu, Falaschetti, & Mindell, 2012; Eggenberger, Tomovic, Münzer, & de Bruin, 2017). Beyond the notion of safety, the mode of slowness of older adults illuminates a greater need for slowing pedestrian movement so those who use wheelchairs and other mobility aids may move about with greater confidence. A neighbourhood designed for pulling out of the fast lane to take time, pause and be slow lets social interaction occur, serving humanity well. The experience of slowness shows itself from the totality of all that constitutes the neighbourhood moving at a pace too fast for older adults.

Being somewhere among nature Jess' words, *drinking it in* express feelings of being filled, satisfied; an experience echoed by many of the participants of this study. Pausing along the way to admire the gardens, sitting under a tree in the

neighbourhood watching and listening, walking in the park watching native bird life and adventuring along wooded pathways, all these ways of being in nature nourish and replenish the participants in this study. Overall, the balance of evidence currently favours the restorative pathway of nature (Bell, Foley, Houghton, Maddrell, & Williams, 2018; Silveirinha de Oliveira et al., 2013) but little is known about the emotional and/or spiritual (Aspinall et al., 2010) or the adventure experiences of green spaces for older adults. The importance of green spaces to the participants in this inner-city neighbourhood study supports earlier studies. Aspinall et al. (2010) found green spaces with trees, nature-related activities and features for older adults as important as the availability of facilities. This study supports the physical benefits of having a park nearby. Furthermore, it supports the limited studies (e.g. Kemperman & Timmermans, 2014) espousing social benefits of open green spaces. Perception that green spaces are accessible and useable influences whether or not older adults use these spaces. What lets the older adults in this study use parks and open spaces includes features that support them to move unhindered (e.g., the existence of a walking path that was smooth and involved minimal undulations); that offer opportunity for frequent rest stops, including seats they can get in and out of, and positioned under shade; that presents natural elements (e.g., gardens with flowers and water features). These findings support earlier studies whose participants were younger than 85 years (e.g. Gibson, 2018; Kemperman & Timmermans, 2014; Ward Thompson, 2013); serving to reinforce the importance of a walkable park with planting that sustains through connection with nature.

The material advantages of 'green' space remains a consistent theme within the therapeutic landscapes literature, offering rich insights into how it feels to experience and move through such settings. The sense that place connects with one's mood is a relational outcome of the interaction between the person with their broader socio-environmental setting. The argument that green spaces afford such a connection has been used to support the therapeutic effect of nature-based environments. Originally, therapeutic environments were associated with religious pilgrimage or retreats where the environment inspires engagement with the person's spirituality (Bell et al., 2018). Such spaces led to feelings of deeper connection, which raises important questions for how urban environments might design secular neighbourhood spaces for contemplative retreat and spiritual renewal. Green spaces designed for retreat and refuge from everyday life, offer possibilities for connection

with a deeper sense of self in the world. This study showed the nutritive effects of being amongst nature and connecting in ways that support the imperative of green inner-city neighbourhoods for everyday living. Urban green spaces are particularly important in high density, inner city areas, because they are a limited resource in built up areas (Aspinall et al., 2010; Kemperman & Timmermans, 2014; World Health Organization, 2007b). The relevance of green spaces is reinforced in this study where neighbourhoods are presently undergoing housing and population intensification, threatening green space as an inner-city neighbourhood resource.

Having something to do

Having something to do is what matters. The humanness of being involved is having something to look forward to doing. Having something to do gives meaning to the day. As in other studies, wanting to do something is meaningful (Foster & Neville, 2010), regardless of how trivial it might seem. For many of these older adults it was continuing with a long-time recreational or leisure activity that gave a sense of identity. It was in how they know themselves as a gardener, embroiderer, or knitter that they participated. Explained ontologically "one is what one does" (Heidegger, 1962/2008, p. 238). Keeping on with familiar activities and making time to do things that particularly interest them brings an enduring purposefulness in older age (Wright-St Clair et al., 2011). The continuance of meaningful activities reflected "the essential-ness of who they are" (Wright-St Clair, 2012, p. 49) and was positively related to purpose for being (B. Grant, 2008). The pursuit "lets something be seen as something" (Heidegger, 1962/2008, p. 57). Being a gardener, a knitter, an architect asserts one 'as' being 'me', this person with something meaningful to do. Understanding themselves through a continuity of already established ways of participating supposedly is central to contentment (Wright-St Clair, 2012). In their own way, each showed that sharing the activity with others is as vital as the activity itself. Consistent with recent research, being involved in an activity that aligns with a sense of self increases older adults' participation, along with a social grouping that evokes identity through shared interests (Bantry-White, O'Sullivan, Kenny, & O'Connell, 2018). Sharing interests helped sustain a sense of togetherness and belonging that kept their involvement going. Additionally enduring leisure activities show what matters culturally to older adults. Gardening, embroidery, and home cooking, are leisure activities that are becoming a thing of the past. These past times

offer a glimpse into past ways of living. As keepers of culture, older adults are gifting these skills for the next generation when opportunities exist for such exchange.

Another aspect of purposeful participation is having things to do for others. Contributing to something beyond the self is a reason for being neighbourly. Contribution in the spirit of neighbourliness is being *busy* whether it is sharing skills and knowledge with others, or being relied on to do something for someone. For some it is small acts of kindness such as a friendly wave, preparing a meal for a sick neighbour, or visiting a lonely neighbour. Others volunteer by 'helping out' at the church or taking on an official role within an organisation. Those with family close by found a greater purpose in being for their family, most particularly for the grandchildren. Being 85 years and older might limit the number of activities older adults have energy to be involved with but being this age has not changed the range of activities or the desire to contribute which included teaching, helping, creating, organising, and politicking. The continuance of contribution to others reflected who they know themselves to be and what they have always done. As was found in a study by Emlet and Moceri (2012), contributing to the neighbourhood was not a matter of filling time but a willingness to actively contribute to others. Willing to give, these older adults gift skills and knowledge for the benefit of others. They spoke of the reciprocity of giving and receiving in terms of feeling valued and respected, a benefit recognised as contribution in gerontological literature and public policy. What this study adds is a nuanced understanding of contribution to neighbourhood that is normally covered over in the literature. It is not so much in what they give as contribution, although in itself it is valued, but it is the spirit in which 'it' is given. The spirit of giving in neighbourliness is an important contribution of older adults to the neighbourhood.

Contributing at this age may bring a need for greater purpose. Doing what they do for others; helping a family member or neighbour, gifting time and skills to an organisation, they do in a mode of solicitous care. Doing what they can is being responsible. Understanding themselves as responsible citizens shows its meaning in what they speak of doing for others. For some, this is involvement in voluntary organisations and for others it is staying current with social and political issues of the world in order to be wise 'head' for their grandchildren. Longitudinal studies support that volunteering in general declines with age particularly after the age of 75 years

(Hank & Erlinghagen, 2009; Hank & Stuck, 2008); yet a small number of the participants in this study contributed as volunteers in organisations for older adults, historic trust or the church. "Citizenship identity …[occupies]… a space of social and institutional inclusion by providing a certain form of social visibility" (Marchand, 2018, p. 481) that has notions of reciprocity, responsibility for others, as well as for the wellbeing of the community. Continuity in the investment of skills learned earlier in professional life lets these participants in advanced age be useful and in turn gain respect for their contribution. Being the age they are, many of the women in this study were not in paid employment, their civic contribution has predominantly been in the domestic space and continues to be. Those who contributed as volunteers in their younger years, continue to volunteer, as they are able. Contributing has become entwined with citizenship (van Hees, Horstman, Jansen, & Ruwaard, 2015) and it is through the variety of social contributions those who volunteer maintain citizenship-identity and a feeling of belonging in the neighbourhood (Marchand, 2018). What of those whose contribution is more nuanced? How is citizenship-identity conferred on the very old in a city neighbourhood that lacks vitality?

Consistent with other studies (e.g. Cuyvers, Thomése, & van Tilburg, 2018) older adults in this study and others, need to be able to determine the extent of their commitment, know there is flexibility, and be able to make choices in keeping with their skills and time commitments. By far, the majority of participants had no church affiliations and spoke of taking time to find an organisation that would meet their needs. Meaningful involvement points to the need for the organisation to be in keeping with their values, not just their interests. Personal alignment with organisational values appears to contribute to a committed involvement in the organisation and provide opportunity to make life meaningful. At the same time, older adults want the organisation to work for them by providing networks and opportunities through which to share experiences (Cuyvers et al., 2018). A neighbourhood in which individuals are well connected to each other and help each other by either volunteering or being neighbourly, has a high degree of social capital (Menec et al., 2015). Policy support for social participation is based on the benefits of social capital for ageing well. As a principle of age-friendly neighbourhoods, social capital places a neighbourhood in a better position to make the community more age-friendly, for example, by being able to fund raise for community programs.

While socially and politically there continues to be an emphasis on participation through formally recognisable channels, dominated by a focus on personal empowerment in terms of civic contributions, volunteerism and employment, we fail to recognise and value more nuanced forms of neighbourhood participation offered by adults in advanced older age.

Having spirit

Neighbourhood participation is getting harder. The participants in this study are living through changes that are given with ageing. What used to be typical of the present has become past and the future seems more uncertain than it used to be (Baars, 2017). Their words *I'm not as good as I was* is knowing themselves as getting older. The adage 'growing old is not for the faint-hearted' is experiencing the harsh edges of things, a creeping inertia that compels them to keep going. An already there oldness is announced in a neighbourhood poorly designed for older adults. Finding themselves in a situation of possibly not coping, all that matters is coping in the here and now. They are always taking care, anticipating and planning for what is ahead. How they keep going is consistent with a range of adaptive strategies (Torres & Hammarström, 2006), such as being helped or being more attentive to the task, using technology or eliminating the task. The irruption of the neighbourhood shows itself as things unready to hand. The participants in this study describe the irruptiveness of finding themselves in need of a seat to rest, needing a pedestrian crossing adjacent to the bus stop, smooth curb drops and quality pavements. This is consistent with numerous studies that identify positive associations between objective and perceived presence of quality pedestrian infrastructure and access to destinations for neighbourhood walking (Christian et al., 2017; Moran et al., 2017; Van Holle et al., 2016; World Health Organization, 2015a). Theoretical notions of accessibility in advanced older age illuminate a spirit of determinedness to keep going, particularly when things are not designed to be used by older adults.

For want of these built features, the environment comes into focus. In the telling of not being able to trust their balance or strength to step from the curb to the road, or trust their vision because the pavement and road merge as one, these participants minimise the difficulties. However, there are difficulties and it is getting more difficult. The human-ness of neighbourhood participation in older age announces itself, appearing vulnerable to a neighbourhood that is not designed for

them. Listening to these participants speak of how taxing it is to get about, supports age-friendly streets research for dedicated pedestrian footpaths that are well-maintained, low curbs, regular seats, and slow traffic (Christian et al., 2017; Giles-Corti et al., 2013; Hooper, Knuiman, Bull, Jones, & Giles-Corti, 2015; Moran et al., 2017). Ontologically, vulnerability dwells in older adults' participation. It is signalled by taking great care, being in want of company, and the finitude of life. Ontically, environmental factors of the neighbourhood impose vulnerability. In a technological world, it is possible to remove some of what causes misery and threatens vulnerability, and we should do so if possible. Public opinion shows a tendency to focus on the vulnerability of ageing. However, vulnerability is not restricted to older adults (or younger children) it is the price of a finite life. The human world is characterised not only by its shared vulnerability but also by the strength of its humane responses (Baars, 2017, p. 974). Drawn into the neighbourhood there is a burden of care. Always taking care, the older adult bears a personal responsibility for being safe that simultaneously reveals a collective burden of care to create a neighbourhood that lets older adults be as capable as possible.

Planning neighbourhoods for older adults needs to be as prevalent as it is for children and working age populations. Evidence outlined in chapter two supports designing neighbourhoods for walking characterised by a range of features including mixed-use activity centres, accessibility of destinations, safety, and the availability, quality and connectivity of pedestrian facilities. A key aspect of creating walkable neighbourhoods identified by the World Health Organization (2015a) is the availability of accessible pedestrian paths to meet locally accepted standards (path wide enough, no step to road, obstacle free, etc.). In addition to quality footpaths, the participants in this study show the importance of reserving footpaths for pedestrians only. Normal sensori-motor decline of ageing makes it difficult for older adults to accommodate the speed of vehicles such as cycles and motor scooters. Anticipating increased mobility scooters requires that in future planning there is accommodation for them to be alongside pedestrians, bicycles, e-bicycles, and motorised traffic, while also designing public transport to accommodate them. The walkability of a neighbourhood is a measureable output of age-friendliness and is associated with a number of physical and social benefits including social neighbourhood connectedness (World Health Organization, 2015a).

A great deal is known about the relevance of neighbourhood environments for providing opportunities for physical and social participation; yet there are few encouraging initiatives at the policy and planning level in Australasia. The state of Victoria in Australia has proposed recommendations for land-use planning and policies that include location of seniors' housing within 1 kilometre of amenities and activities and the creating of safer road environments, speeds for older pedestrians (Garrard, 2013). New Zealand's city of Hamilton, presented its age-friendly cities plan to the WHO in 2018. In response to a recognised deficit of appropriate housing for older adults, it proposed a goal of exploring options for smaller communal 'village' type housing (Hamilton City Council, 2018). Additionally, the principle goal for social participation is to continue and enhance what is in place; yet, the recognised lack of opportunities for social participation by adults over the age of 80 years in Hamilton city is not addressed. The city of Melville in Western Australia has created a network of local businesses to implement accessible and age-friendly initiatives that improve the customer experience for older adults and people living with disabilities including dementia (City of Melville, 2017).

Implications

Central government age-friendly policies

This study's findings have clear implications for New Zealand age-friendliness at all levels of government. Key international and national findings identify commitment from central government as a key success factor in age-friendly programs (Neville, Adams, Napier, Shannon, & Jackson, 2018). In New Zealand, the Office for Seniors is tasked with leading national age-friendly policy and strategies. Internationally frameworks have identified a central government hub to connect people, ideas, and resources to support sustainability (Jeste et al., 2016). Incentive for local governments needs to be driven from central government, by way of leadership, co-ordination, and education from the Office for Seniors. Further, funding to advance specific programs is needed to support regional expertise and developments. Support in the form of a 'toolkit' that synthesises the wider ageing research for use in urban policy planning for becoming age-friendly at the regional level is likely to help local initiatives. National systems and processes for monitoring and evaluating progress regionally and nationally are needed to develop best-practice guidelines appropriate for New Zealand and for sustainability. Evaluation of successes and failures provides

important lessons, not only for New Zealand but also as a member of the WHO Global network for Age-Friendly Cities and Communities. New Zealand is obliged to contribute and to secure ongoing commitment and funding for developments, including an obligation to establish core indicators for monitoring and evaluating progress regionally and nationally. The WHO (2015a) international indicators provides a useful guide for developing indicators relevant to New Zealand as a whole including its oldest population group of 85 years and older.

The WHO age-friendly framework as adopted by the New Zealand government reflects social participation as involvement in activities and events and contribution as volunteering and employment. The participation of adults over 85 years is less about involvement in activities, although still very important, and more about neighbourliness. This more nuanced contribution of neighbourliness by adults in advanced age goes unnoticed at a social and policy level. Through the spirit of neighbourliness they are contributing to a sense of community within neighbourhoods, fostering a human need for connectedness and belonging. Their contribution is in neighbourliness, a contribution that is not formally recognised or valued in the age-friendly literature or within policy. If New Zealand is serious about supporting older adults to age in place, these more nuanced forms of social contribution need to be supported at a neighbourhood and policy level. New Zealand age-friendliness needs further conceptualising to include neighbourliness as a core indicator with measureable outcomes.

Local government

Commitment from local councils is a key factor for successfully developing and implementing age-friendly communities (Rémillard-Boilard et al., 2017). Auckland Council has recently committed to becoming an age-friendly city. Within the context of its strategic growth and medium intensification policy, Council commitment to age-friendliness is an important public acknowledgment of its intent to address challenges and opportunities for the ageing population of Auckland city.

Identifying areas of action represents a key step in the implementation of age-friendly policies. The WHO encourages cities and communities to implement and plan initiatives that begin with a baseline assessment of their age-friendliness (WHO 2015a). Older adults are in the best position to say how age-friendly a city is for them. Adaptable and flexible ways of hearing diverse 'voices' of the older population

is recommended for gathering baseline assessment data, for example, online surveys, interviews, and focus groups (Garon et al., 2016; Plouffe, Kalache, & Voelcker, 2016). These new ways must be designed to realistically invite adults 85 years and older to speak, confident in the knowledge their voice will be listened to and considered along with those of all ages. Questions related to neighbourliness are crucial to assessing age-friendliness and need to be included as part of baseline assessment data gathering as well as innovative methods to identify and prioritise areas of action involving older adults as co-researchers at all phases of the process (Buffel, 2015; De Donder et al., 2013). Involving adults 85 years and older as key participants represents a key challenge for age-friendliness as they have different needs to those aged 65 years.

Internationally and nationally, research supports that creating an age-friendly steering committee, with a local council representative on that committee, provides necessary endorsement for local councils to proceed in an age-friendly direction (Garon et al., 2014; Neville et al., 2018). Leadership and positive working relationships between the local council and community create more successful and sustainable age-friendly outcomes (Menec et al., 2014; Spina & Menec, 2015); indicating their importance for progressing age-friendly initiatives.

In line with the World Health Organization (2015a) guidelines, local councils need to plan and develop services, facilities and neighbourhood environments in consultation with older adults (Menec et al., 2014; Novek & Menec, 2014). An important opportunity for age-friendly Auckland would be shifting the focus from citywide or community-wide strategies to local neighbourhood-based scale developments. Implications for the success of age-friendly initiatives requires the active participation of older adults in all stages of age-friendly neighbourhood initiatives (Remillard-Boilard, 2018). Particular efforts need to be turned toward how to include and retain involvement of adults aged 85 years and older. One example of working with the community is strengthening the already established older adult advisory group set up to advise councils on ageing related issues. These advisory groups currently exist within a number of New Zealand city councils in the spirit of consultation. For the consultative process to work the concerns of the advisory group need to be taken seriously by decision-makers. International evidence suggests that too often advisory committees concerns are ignored and their existence is merely a symbolic nod toward consultation (Menec et al., 2014).

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The WHO (2015a; 2007b) emphasised the importance of developing collaborative partnerships with stakeholders to ensure developments are suitable for older adults. Getting about the neighbourhood and being with others has implications for designing services and facilities to meet the needs of those 85 years and older. Older adults are more likely to use medical services, library, the bank, and grocery shopping. In order to be an age-friendly neighbourhood its services and facilities must understand the needs of 85 year olds and deliver age-appropriate services. The WHO (2015a) core indicators have implications for city public transport that supports these services be within 300 meters for 95% of the population. While the metro subway is considered accessible if it is within 500 meters (7 minutes walk), the bus stop must be within 300 meters (5 minutes walk). Accessible public transport such as kneeling buses and flexible transport options provide improved use of public transport by older adults. An age-friendly city and community policy requires collaborative partnerships with public and private sector to implement age-friendly initiatives successfully (Garon et al., 2014); for example, public transport providers to design services with older transport users in mind, using technological improvements, and customer insight to improve their experiences.

The findings of this study add to community age-friendliness knowledge by showing the need to plan for slowing pedestrian measures to accommodate need for pausing, sitting, and resting that is beyond simply making seats available. While regularly spaced seating with back and armrests is important it is having somewhere to be with others – including green spaces and parks, shade, and positioned in the hub of action, and quiet pleasant places that accommodates slower walking pace, sitting and social interaction. Further accommodation of slower paced walking in older age indicates a need for longer pedestrian crossing lights. It also calls for effective separation of pedestrian and vehicular mobility, for example, bikes and mobility scooters. Neighbourhood streets that are pleasant to walk in are more lively streets with greater opportunities for older adults to interact and connect.

A second finding is a lack of suitable gathering places for older adults in inner city neighbourhoods. Addressing the social environment is as important as the physical environment. A weakness of the age-friendly cities and communities framework (WHO, 2007a) is a failure to acknowledge the pressures that exist in many urban areas and the effect on older adults' participation. A need for neighbourhood gathering in older age is to lay claim to contested 'developer' land for

neighbourhood gathering spaces; spaces that invite being with others and amidst nature. Providing for 'green' neighbourhood living with green spaces/parks and raised community gardens is more than being able to get in, around, and out of a place. How can urban planners and developers know what is workable and useable for people 85 years and older? There needs to be closer relationships between those leading development of urban areas and age-friendly issues and older urban residents (Thomese et al., 2018). Universal design standards are important for accessibility but designing for adults in advanced age is more than a 'tick box' exercise. The OPERAT assessment tool provides a useful tool for identifying areas in which older people would positively benefit from design interventions that integrate nature into city neighbourhoods (Burholt et al., 2016). Findings from this study identify inner city living environments are not presently designed to be neighbourhoods for everyday living by adults over 85 years.

While Auckland's older adults are able to benefit from urban structures and services, such as transportation services and diverse cultural opportunities, the city is not designed on a neighbourhood scale that supports their residential living. Thus, the city's older residents experience limited opportunities for participation in neighbourhood life. Public policy developments need to consider innovations that intentionally create a sense of neighbourhood. A sense of neighbourhood serves urban living for people of all ages, and carries more importance for older adults. A comprehensive growth strategy needs to consider issues of intensification around centres on a neighbourhood scale not only on a regional scale. A neighbourhood bound by corridors of mixed use and medium-high density that supports appropriate bus transport for older adults (e.g. kneeling buses, courteous bus drivers, and flexible transport options) is likely to best serve neighbourhood living. Consideration for services appropriate for diversity in older age needs to move beyond the youth-centric focus of urban development.

Nursing practice

Although the idea of making communities more age-friendly in order to promote older adults neighbourhood participation has received an increasing amount of attention from governments, organisations, and scholars over the past decade, there is scarce empirical literature for nursing practice. The findings in this study imply there

are messages for how nursing might incorporate neighbourhood participation as a health promoting strategy into nursing practice.

There is abundant evidence to support that as people age there is an increase in health needs and use of health services. Indeed, this calls for skilled nursing care to respond to the complexity of ill health in older age. Although the majority of older adults age and die in their own home, medicalisation of older adults dominates the health services. Many users of nursing services are older. The low status of older adult care in hospital settings (Baumbusch et al., 2016; Rush, Hickey, Epp, & Janke, 2017) and negative social attitudes toward older adults are acted out in career choices where nurses avoid settings for older adult care (Wilson et al., 2017). Nurses' attitudes resonate with the cumulative body of evidence showing acute care hospital environments as a poor fit for the care of older adults (Baumbusch et al., 2016; Liu et al., 2013; Rush et al., 2017) and reinforce predominant ageist attitudes and negativity by nurses toward care of older adults. Nurses have adopted this negative attitude through principally focusing on detection, diagnosis, and treatment of problems in a bid to 'fix' older adults. But there is no 'fix' for getting older. Indeed, skilled nursing care and conscious awareness of ageism is needed to manage the complexity of ill health and frailty in advanced age. However, the problem arises when nurses assume that older adults as a group only experience ill health and frailty. A major view of older adults as frail and dependent exemplifies a prejudice against older age that minimises and diminishes older adults' autonomy and independence. An ageist view of older adults reinforces a deficit model of nursing care focused almost exclusively on managing illness of individuals whether in hospital or at home, to the detriment of health promoting opportunities.

A paradigm shift from the sole focus on nursing delivery of interventions at an individual level to more prevention/promotion-focused, community-based approaches have been clearly articulated in a number of age-related policies. For example, the New Zealand Healthy Ageing Strategy (Ministry of Health, 2016a) advocated for resources to be reallocated to promote healthy lifestyles and preventive care to enable older adults to age in place. While nurses are legally obliged to uphold policy direction they seem ill prepared or interested in the social and environmental factors influencing health and living well in older age. Primary and public health theories suggest it is important for nurses to understand the characteristics of the neighbourhood in which they practice. For example, given the health benefits of

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participation, nurses have a major role to play in communicating the importance of physical activity to older adults and making discussions about strategies for overcoming barriers to walking as an integral part of their health teaching. So too, discussions with older adults about the importance of maintaining social relationships while also being involved in community-wide discussions about improving social inclusiveness for older adults, particularly over 85 year olds. Primary health care nurses have a dual obligation of responding to the individual older adult who needs nursing care and simultaneously to the population group of older adults in need of a supportive community environment for ageing-in-place. Age-friendliness needs to be included in primary and public health nursing curricula as part of community assessment skills development.

The principles of implementing age-friendly initiatives align well with primary healthcare nursing principles of encouraging participation, promoting self-reliance and self-determination (World Health Organization, 2007b, 2015b). The primary health model of nursing is premised on nurses working in partnership with other agencies and with the community to promote the health of older adults as a population group (Lewenson & Truglio-Londrigan, 2017). Being knowledgeable about community resources and consulting with older adults on their experience, for example, of using key local services the nurse gathers insights for improved and appropriate neighbourhood services for older adults. This way of working assumes a positive ageing perspective and understanding older adults' need for neighbourhood participation. It requires an appreciative listening by the nurse that is open to hearing what older adults ordinarily do and want to continue doing in everyday neighbourhood life. An appreciative listening affects not only what the nurse listens for and hears but deeply influences what the older adult is encouraged to speak of. Such development in nursing assessment is dependent on a change of attitudes and heightened awareness by nurses to avoid reductionist medical responses in nursing practice.

Increased knowledge about the diversity of older adults is needed to support well and independent older adults' participation in their preferred ways. Nursing as a profession has not been good at taking an interest in how to support well older adults. While nursing professes to take a holistic approach to health, nursing practice defaults to clinical management of the unwell in its daily practice. Listening to what matters in the older person's everyday life of physical activities and social

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engagement is to understand the significance of neighbourhood participation as a health determinant. The problem is that while most nurses might espouse the value of person-centred health care, they have limited interest in the social dimension of older adults' health and wellbeing. For this to change healthcare organisations need to have a zero ageist policy and resource nurses to work from an age-friendly perspective.

While nurses are legally obliged to uphold policy direction they seem unaware or indifferent to the social and environmental factors influencing health and living well in older age. Primary health care nurses have a dual obligation that is at once individual and community focused requiring a personal as well as a social lens on understanding older adults' holistic needs. It involves responding to the individual older adult who needs personal supportive nursing care and to the population group of older adults in need of a supportive community environment for ageing-in-place. This imposes a moral commitment on primary health nurses to advocate for older adults as a population group in the neighbourhood in which they practice. For example, supporting older adults to identify environmental features that facilitate and impede their everyday participation the nurse would need to know the available mechanisms for communicating these and if necessary, advocating public opportunities for older adults' 'voice' be heard. Age-friendly nursing practice is one that acknowledges communities know better about their own community and they can determine what their needs are and how they can best be met.

Nursing education

Educational experiences in nursing programmes have a role to play in instilling positive attitudes to ageing (Rodgers & Gilmour, 2011; Rush et al., 2017). Conversely nursing curricula that promotes the perception of modern nursing as technical, with more focus on acute and critical care eschews primary health care and health of older adults. Thus, nursing faculties' commitment to implementing an aged-friendly curriculum cannot be over emphasised. In accordance with the WHO (2007b) age-friendly cities and communities framework, nursing curriculum would need to integrate a life-course approach to ageing in all healthcare contexts. A nursing curriculum with a gerontology course appears essential to developing positive attitudes of student nurses toward older age. This is most effective when administered by nursing role models that are knowledgeable and enthusiastic about issues related to older adults (Garbrah, Välimäki, Palovaara, & Kankkunen, 2017).

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Further research

This thesis points to the 'being' of neighbourhood participation as neighbouring in older age. Because declines in neighbouring may have detrimental effects on the older resident, it is important to include neighbouring in research on social dimensions of urban neighbourhood environments. In addition, as most of the research is urban/suburban, further exploration of what neighbourhood participation means to those who live in rural neighbourhoods would be beneficial to add to age-friendly learning as initiatives unfold. The inclusion criteria for this phenomenological study included a small non-representational sample of adults 85+ years. A larger cross-sectional study of a representative sample of Auckland's highly diverse population: Māori, Pacifica, Asian would add to understandings of neighbourhood participation.

From a research perspective, as well as policy perspective, an important undertaking for the future is to conduct outcome evaluations to determine whether age-friendly projects are being implemented in New Zealand and whether they benefit older adults, particularly those in advanced age. The first stage of such research might be to develop age-friendly indicators at the local level for neighbourhoods to monitor their own progress and to have the capacity to conduct across neighbourhood evaluations. It is important that such evaluation work involve older adults, as co-researchers and in a consultative capacity, to find out what they consider important for inclusion in an age-friendly assessment tool. Planning professionals and policy makers have indicated that to help progress the influence of health research and its translation into planning policy and practice, there is an urgent need for practice-based evidence evaluating the effectiveness of existing planning policies-using policy-relevant measures (Brownson, Hoehner, Day, Forsyth, & Sallis, 2009; Durand, Andalib, Dunton, Wolch, & Pentz, 2011).

Strengths and Limitations

This study has a number of limitations that could be addressed in future research. First, this study contains limitations commonly levelled at phenomenological studies where participant numbers are limited. Methodologically it is the richness and depth of data that matters rather than the number of participants. Second, the participants were mono-cultural and by limiting the study to English speaking older adults, non-English speaking older immigrants were precluded. I acknowledge the absence of

their 'voice' and the contribution that their experiences could have added to the research.

A strength of this study was that it gave voice to the 85+ year olds, an otherwise silent population group. The data were thick and rich with personal experiences that add to age-friendly policy discussions with new possibilities of practice engagement. By focusing on everyday participation this study has revealed experiences of encountering the neighbourhood environment in its wholeness. Taking the experience of participation and the neighbourhood environment as a whole experience has explored the contribution of older adults to the humanness of neighbourhoods. Taking an ontological approach has illuminated what older adults fundamentally need for the sake of everyday neighbourhood participation. This study shows new understandings of neighbourhood participation that can prompt policy initiatives and renew discourse of urban ageing and active ageing in ways that challenge taken-for-granted assumptions.

Although generalisation of the findings is not aimed for in this phenomenological study, the congruence between each older resident's stories and the research text as a whole suggests these participants' experience may 'hold true' for others living in cities undergoing growth. The particular stories revealed how nuanced everyday lived experience of neighbourhood participation can be. A strength of this methodology is the trusting relationship that developed within the interviews. Many times the participants expressed surprise that they were telling these stories for the first time. The delight in receiving the written stories for their keeping and the way in which a number followed up by email or phone calls with additional impressions or experiences suggested to me they felt validated. Their story, and therefore they as a person, had something of value to contribute to others. Finally, this study draws from a representative sample of inner-city dwelling older adults in one city of mixed gender (male and female), mixed accommodation type (single dwelling and apartment), and having lived varying lengths of time in their neighbourhood (5-92 years).

Conclusion

Policy and theoretical emphasis on active ageing has captured participation as an activity-based involvement for the sake of health benefits to the individual and contribution to society. An emphasis on 'active' ageing has been useful as policy

agenda for shifting the stereotype of care burden toward older adults as contributing citizens. The societal value of older adults' participation as contribution is inherently related to being productive, a focus that overshadows the human value of being aged. The freedom, mobility, and material wealth characteristic of our post-industrial society has contributed to a social epidemic of loneliness, spiritual vacuum and lack of a greater purpose. With greater social freedom and global mobility has come geographical fragmentation of the family.

Older adults often stand outside the rush and busyness of urban life. Instead, they serve as reservoirs for human connection and can potentially fill some of the social roles traditionally performed by older members of others' families. Seeking connectedness, their presence gifts neighbourhoods a greater opportunity for connection. In this way, older adults help address a core failing of contemporary society and contribute by offering greater social opportunities for healing. What older adults gift neighbourhoods through their presence as neighbours is existentially important. My insight from this study is that older adults' neighbourhood participation is being aged neighbours of their neighbourhood. Being a neighbour in advanced age is participating in society.

While neighbourhoods have retained their importance in the lives of these 85+ year olds, changes have occurred that have relevance to age-friendliness and public policy. The WHO age-friendly framework adopted by the New Zealand government, promotes older adults as needing encouragement to participate in opportunities and activities created for their inclusion and involvement. The WHO (2007a) age-friendly checklist's emphasis on making community programs and events available, accessible, and affordable to older adults perpetuates social participation as involvement in events and activities or involvement in civic contribution through voluntary activities and paid work. This assumption is continued in the more recent WHO (2015a) core indicators guide for age-friendly communities. Opportunities for involvement are important but they are not the whole picture of social participation, particularly in advanced age.

The element missing in this picture of age-friendliness is older adults as creators of age-friendly neighbourhoods. Being neighbourly is how they contribute to the neighbourhood, possibly more so in advanced age. It is not necessarily through volunteering or employment, nor is it involvement in organised activities,

particularly at the age of 90 years. Older adults' everyday neighbourhood participation is neighbourliness. In ordinary everyday participation in the neighbourhood, they are creating age-friendly neighbourhoods. Continuing to hold on to familiar routines and behaviours has a greater purpose of maintaining the neighbourhood as a vital space for living. Participation at this age is less about involvement in activities, although important, and more about being in the neighbourhood. As seen in this study, older adults' neighbourhood participation is the visibility of their agedness amidst the neighbourhood. Being aged amidst the busyness of urban neighbourhoods, they mitigate the sense of lost community. Offering opportunity for connectedness, they soften the hard edges of the urban environment and enrich neighbourhood life. They play an essential role in humanising our cities.

Ideas about humanising cities largely focus on the physical environment, such as neighbourhood walkability and designing neighbourhoods on a human scale. While this is critically important it neglects an equally important aspect, the social ecology. The community mindedness of neighbourhoods is dying and societal investment is needed to protect it. In much the same way that New Zealand as a nation is investing in solutions to save its endangered birds, so too it is the responsibility of us all to contribute to solutions for loss of neighbourhood connectedness. Older adults have neighbouring skills. They are equipped and available to contribute to their neighbourhoods. They are not sitting back, waiting for things to happen. They are a resource. This resource should be considered not only in the visible sense of participating in activities but in the more nuanced sense of nurturing conversations and showing slow ways of being in a busy urban environment. Adults of advanced age contribute a quality that inheres within the neighbourhoods themselves. If older adults' neighbouring discloses the world of neighbourhood, then how neighbourhoods are designed is significant. City neighbourhoods designed to welcome older adults' neighbourliness will be enriched. Neglecting to do so threatens to further impoverish city neighbourhoods.

Neighbourhood participation is not necessarily doing this or that. It is in the spirit of neighbourliness where the subtle gifting by adults in advanced age is discovered. As the mood of the story signals the actors' performance, so the essence of neighbourhood participation in advanced age signals neighbouring. In the midst of

inner city busyness, older adults, aged 85 and over, are going about neighbouring in the spirit of neighbourliness.

References

Aird, R., & Buys, L. (2015). Active aging: Exploration into self-ratings of "being active," out-of-home physical activity, and participation among older Australian adults living in four different settings. *Journal of Aging Research, 2015*, 12pgs. doi:10.1155/2015/501823

Alley, D., Liebig, P., Pynoos, J., Banerjee, T., & Choi, I. (2007). Creating elder-friendly communities: Preparations for an aging society. *Journal of Gerontological Social Work, 49*, 1-18.

Anderson, N., Damianakis, T., Kröger, E., Wagner, L., Dawson, D., Binns, M., . . . Cook, S. (2014). The benefits associated with volunteering among seniors: A critical review and recommendations for future research. *Psychological Bulletin, 140*(6), 1505-1533. doi:10.1037/a0037610

Andrews, G., & Phillips, D. (2005). *Ageing and place: Perspectives, policy, practice*. London, United Kingdom: Routledge.

Annells, M. (1999). Evaluating phenomenology: Usefulness, quality and philosophical foundations. *Nurse Researcher, 6*(3), 5-19.

Asher, L., Aresu, M., Falaschetti, E., & Mindell, J. (2012). Most older pedestrians are unable to cross the road in time: A cross-sectional study. *Age and Ageing, 41*(5), 690-694. doi:10.1093/ageing/afs076

Aspinall, P., Ward Thompson, C., Alves, S., Sugiyama, T., Brice, R., & Vickers, A. (2010). Preference and relative importance for environmental attributes of neighbourhood open space in older people. *Environment and Planning B: Planning and Design, 37*, 1022-1039. doi:10.1068/b36024

Atchley, R. (1989). A continuity theory of aging. *Gerontologist, 29*, 183-190.

Baars, J. (2017). Aging: Learning to live a finite life. *The Gerontologist, 57*(5), 969-976. doi:10.1093/geront/gnw089

Badley, E. M. (2008). Enhancing the conceptual clarity of the activity and participation components of the International Classification of Functioning,

Disability, and Health. *Social Science and Medicine, 66*(11), 2335-2345. doi:https://doi.org/10.1016/j.socscimed.2008.01.026

Bantry-White, E., O'Sullivan, S., Kenny, L., & O'Connell, C. (2018). The symbolic represetnation of community in social isolation and loneliness among older people: Insights for intervention from a rurual Irish case study. *Health and Social Care in the Community, 26*, 552-559.

Barton, H., Grant, M., & Guise, R. (2010). *Shaping Neighbourhoods* (2nd ed.). London: Routledge.

Baum, F. (2015). *The new public health*. Retrieved from https://ebookcentral.proquest.com/lib/aut/reader.action?docID=4786467&ppg=421

Baumbusch, J., Leblanc, M., Shaw, M., & Kjorven, M. (2016). Factors influencing nurses' readiness to care for hospitalised older people. *International Journal of Older People Nursing, 11*(2), 149-159. doi:10.1111/opn.12109

Beard, J., & Montawi, B. (2015). Age and the environment: The global movement towards age-friendly cities and communities. *Journal of Social Work Practice, 29*(1), 5-11. doi:10.1080/02650533.2014.993944

Beard, J., & Petitot, C. (2010). Ageing and urbanization: Can cities be designed to foster active ageing? *Public Health Reviews, 32*(2), 1-18.

Bell, S., Foley, R., Houghton, F., Maddrell, A., & Williams, A. (2018). From therapeutic landscapes to healthy spaces, places and practices: A scoping review. *Social Science and Medicine, 196*, 123-130. doi:10.1016/j.socscimed.2017.11.035

Berg, P., Kemperman, A., de Kleijn, B., & Borgers, A. (2015). Locations that support social activity participation of the aging population. *International Journal of Environmental Research and Public Health, 12*(9), 10432-10449. doi:10.3390/ijerph120910432

Berger, R. (2015). Now I see it, now I don't: Researcher's position and reflexivity in qualitative research. *Qualitative Research, 15*(2), 219-234. doi:10.1177/1468794112468475

Biggs, S., & Carr, A. (2015). Age- and child-friendly cities and the promise of intergenerational space. *Journal of Social Work Practice, 29*(1), 99-112.

Black, K., & Dobbs, D. (2015). Community-dwelling older adults' perspectives on what matters most: Findings from an exploratory inquiry. *Activities, Adaptation & Aging, 39*(2), 133-152.

Black, K., Dobbs, D., & Young, T. (2015). Aging in community: Mobilizing a new paradigm of older adults as a core social resource. *Journal of Applied Gerontology, 34*(2), 219-243.

Bowling, A., & Stafford, M. (2007). How do objective and subjective assessments of neighbourhood influence social and physical functioning in older age? Findings from a British survey of ageing. *Social Science and Medicine, 64*, 2533-2549. doi:10.1016/j.socscimed.2007.03.009

Bramley, G., Dempdey, N., Power, S., Brown, C., & Watkins, D. (2009). Social sustainability and urban form: Evidence from five British cities [Review]. *Environment and Planning A, 41*(9), 2125-2142. doi:10.1068/a4184

Brookfield, K., & Tilley, S. (2016). Using virtual street audits to understand the walkability of older adults' route choices by gender and age. *International Journal of Environmental Research and Public Health, 13*(11), 1-12. doi:10.3390/ijerph13111061

Broome, K., Worrall, L., Fleming, J., & Boldy, D. (2012). Evaluation of flexible route bus transport for older people. *Transport Policy, 21*, 85-91. doi:10.1016/j.tranpol.2012.02.005

Brownson, R., Hoehner, C., Day, K., Forsyth, A., & Sallis, J. (2009). Measuring the built environment for physical activity: State of the science. *American Journal of Preventive Medicine, 36*(4, Suppl.), 99-123. doi:10.1016/j.amepre.2009.01.005

Buffel, T. (2018). Social research and co-production with older people: Developing age-friendly communities. *Journal of Aging Studies, 44*, 52-60.

Buffel, T. (Ed.). (2015). *Researching age-friendly communities: Stories from older people as co-investigators*. Retrieved from http://hummedia.manchester.ac.uk/schools/soss/brochures/Age-Friendly-Booklet.pdf

Buffel, T., De Donder, L., Phillipson, C., Dury, S., De Witte, N., & Verté, D. (2014). Social participation among older adults living in medium-sized cities in Belgium: The role of neighbourhood perceptions. *Health Promotion International, 29*(4), 655-668. doi:10.1093/heapro/dat009

Buffel, T., Handler, S., & Phillipson, C. (Eds.). (2018). *Age-friendly cities and communities: A global perspective*. Retrieved from http://ebookcentral.proquest.com/lib/aut/detail.action?docID=5349381

Buffel, T., McGarry, P., Phillipson, C., De Donder, L., Dury, S., De Witte, N., . . . Verté, D. (2014). Developing age-friendly cities: Case studies from Brussels and Manchester and implications for policy and practice. *Journal of Aging and Social Policy, 26*(1-2), 52-72. doi:10.1080/08959420.2014.855043

Buffel, T., & Phillipson, C. (2016). Can global cities be 'age-friendly cities'? Urban development and ageing populations. *Cities, 55*, 94-100. doi:10.1016/j.cities.2016.03.016

Buffel, T., Phillipson, C., & Scharf, T. (2012). Ageing in urban environments: Developing 'age-friendly' cities. *Critical Social Policy, 32*(4), 597-617. doi:10.1177/0261018311430457

Buffel, T., Phillipson, C., & Scharf, T. (2013). Experiences of neighbourhood exclusion and inclusion among older people living in deprived inner-city areas in Belgium and England. *Ageing & Society, 33*(1), 89-109. doi:10.1017/S0144686X12000542

Burholt, V., Roberts, M., & Musselwhite, C. (2016). Older People's External Residential Assessment Tool (OPERAT): A complementary participatory and

metric approach to the development of an observational environmental measure. *BMC Public Health, 16*(1), 1022-1036. doi:10.1186/s12889-016-3681-x

Burns, V., Lavoie, J. P., & Rose, D. (2012). Revisiting the role of neighourhood change in social exclusion and inclusion of older people. *Journal of Aging Research, 2012*, 1-12. doi:10.1155/2012/148287

Buys, L., Burton, L., Cuthill, M., Hogan, A., Wilson, B., & Baker, D. (2015). Establishing and maintaining social connectivity: An understanding of the lived experiences of older adults residing in regional and rural communities. *Australian Journal of Rural Health, 23*(5), 291-294. doi:10.1111/ajr.12196

Caelli, K. (2001). Engaging with phenomenology: Is it more of a challenge than it needs to be? *Qualitative Health Research, 11*(2), 273-281.

Carpiano, R., & Hystad, P. (2011). "Sense of community belonging" in health surveys: What social capital is it measuring? *Health & Place, 17*(2), 606-617. doi:10.1016/j.healthplace.2010.12.018

Casey, E. (1997). *The fate of place: A philosophical history.* Los Angeles: University of California Press.

Casey, E. (2001). Between geography and philosophy: What does it mean to be in the place-world? *Annals of the Association of American Geographers, 19*(4), 683-693.

Cattan, M., Hogg, E., & Hardill, I. (2011). Improving quality of life in ageing populations: What can volunteering do? *Maturitas, 70*(4), 328-332.

Cerin, E., Zhang, C. J. P., Barnett, A., Sit, C. H. P., Cheung, M. M. C., Johnston, J. M., . . . Lee, R. S. Y. (2016). Associations of objectively-assessed neighborhood characteristics with older adults' total physical activity and sedentary time in an ultra-dense urban environment: Findings from the ALECS study. *Health and Place, 42*, 1-10. doi:10.1016/j.healthplace.2016.08.009

Chaudhury, H., Campo, M., Michael, Y., & Mahmood, A. (2016). Neighbourhood environment and physical activity in older adults. *Social Science and Medicine, 149*, 104-113. doi:10.1016/j.socscimed.2015.12.011

Chaudhury, H., Mahmood, A., Michael, Y., Campo, M., & Hay, K. (2012). The influence of neighborhood residential density, physical and social environments on older adults' physical activity: An exploratory study in two metropolitan areas. *Journal of Aging Studies, 26*(1), 35-43. doi:doi.org/10.1016/j.jaging.2011.07.001

Christian, H., Knuiman, M., Divitini, M., Foster, S., Hooper, P., Boruff, B., . . . Giles-Corti, B. (2017). A longitudinal analysis of the influence of the neighborhood environment on recreational walking within the neighborhood: Results from RESIDE. *Environmental Health Perspectives, 125*, 1-10. doi:10.1289/EHP823

City of Melville. (2017). *Age-friendly Melville Plan 2017-2021*. Retrieved from https://www.melvillecity.com.au/CityOfMelville/media/Documents-and-PDF-s/Web-version-Age-Friendly-Melville-Plan-2017-2021_1.pdf

Clark, T. (2011). *Martin Heidegger* (2nd ed.): Taylor & Francis. Retrieved from https://ebookcentral-proquest-com.ezproxy.aut.ac.nz/lib/aut/detail.action?docID=683931

Crowther, S., Ironside, P., Spence, D., & Smythe, E. (2017). Crafting stories in hermeneutic phenomenology research: A methodological device. *Qualitative Health Research*, 1-10. doi:10.1177/1049732316656161

Cuyvers, G., Thomése, F., & van Tilburg, T. (2018). Participation narratives of Third Age adults: Their activities, motivations and expectations regarding civil society organisations. *Journal of Aging Studies, 46*, 10-16. doi:10.1016/j.jaging.2018.05.003

Dahan-Oliel, N., Mazer, B., Gelinas, I., Dobbs, B., & Lefebvre, H. (2010). Transportation use in community-dwelling older adults: Association with participation and leisure activities. *Canadian Journal on Aging/Revue*

Canadienne Du Vieillissement, 29, 491-502. doi:10.1017/S0714980810000516

Dahlberg, L., Agahi, N., & Lennartsson, C. (2018). Lonelier than ever? Loneliness of older people over two decades. *Archives of Gerontology and Geriatrics, 75*, 96-103. doi:10.1016/j.archger.2017.11.004

Dalziel, L. (2001). *The New Zealand Positive Ageing Strategy*. Wellington, New Zealand: Ministry of Social Policy.

Davey, J. (2017). *Age-friendly cities and communities: World experience and pointers for New Zealand*. Wellington, New Zealand: Ministry of Social Development. Retrieved from https://www.msd.govt.nz

Davey, J., & Glasgow, K. (2006). Positive ageing: A critical analysis. *Policy Quarterly, 2*(4), 21-27.

Day, R. (2010). Environmental justice and older age: Consideration of a qualitative neighbourhood-based study. *Environment and Planning A, 42*(11), 2658-2673. doi:10.1068/a43109

De Chesnay, M. (2014). *Nursing Research using data analysis: Qualitative designs and methods in nursing*. New York, NY: Springer.

De Donder, L., Buffel, T., Dury, S., De Witte, N., & VertÉ, D. (2013). Perceptual quality of neighbourhood design and feelings of unsafety. *Ageing & Society, 33*(6), 917-937 921p. doi:10.1017/S0144686X12000207

De Donder, L., De Witte, N., Buffel, T., Dury, S., & Verte, D. (2012). Social capital and feelings of unsafety in later life: A study on the influence of social networks, place attachment, and civic participation on perceived safety in Belgium. *Research on Aging, 34*(424–448.).

de Filippis, J., Fisher, R., & Shragge, E. (2010). *Contesting community: The limits and potential of local organizing*. New Brunswick, NJ: Rutgers University Press.

Degnen, C. (2012). *Ageing selves and everyday life in the north of England: Years in the making* Manchester, United Kingdom: University Press.

Desrosiers, J., Robichaud, L., Demers, L., Gelinas, I., Noreau, L., & Durand, D. (2009). Comparison and correlates of participation in older adults without disabilities. *Archives of Gerontology and Geriatrics, 49*(3), 397-403. doi:10.1016/j.archger.2008.12.006

Dobner, S., Musterd, S., & Droogleever, F. (2016). 'Ageing in place': Experiences of older adults in Amsterdam and Portland. *GeoJournal, 81*(2), 197-209. doi:10.1007/s10708-014-9613-3

Dovey, K. (1985). The quest for authenticity and the replication of environmental meaning. In *Dwelling, Place And Environment* (pp. 33-49). New York: Columbia University Press.

Dowling, M. (2004). Hermeneutics: An exploration. *Nurse Researcher, 11*(4), 30-39.

Dreyfus, H. (1991). *Being-in-the-world: A commentary on Heidegger's "Being and Time"* Cambridge, Mass: The MIT Press.

Durand, C., Andalib, M., Dunton, G., Wolch, J., & Pentz, M. (2011). A systematic review of built environment factors related to physical activity and obesity risk: Implications for smart growth urban planning *Obesity Reviews, 12*(5), 173-182. doi:doi:10.1111/j.1467-789X.2010.00826.x

Eggenberger, P., Tomovic, S., Münzer, T., & de Bruin, E. (2017). Older adults must hurry at pedestrian lights! A cross-sectional analysis of preferred and fast walking speed under single- and dual-task conditions. *PloS One, 12*(7), 1-17. doi:10.1371/journal.pone.0182180

Emlet, C., & Moceri, J. (2012). The importance of social connectedness in building age-friendly communities. *Journal of Aging Research, 2012*, 1-9. doi:doi:10.1155/2012/173247

Engel, L., Chudyk, A. M., Ashe, M. C., McKay, H. A., Whitehurst, D. G. T., & Bryan, S. (2016). Older adults' quality of life: Exploring the role of the built

environment and social cohesion in community-dwelling seniors on low income. *Social Science and Medicine, 164*, 1-11. doi:10.1016/j.socscimed.2016.07.008

Fang, M., Woolrych, R., Sixsmith, J., Canham, S., Battersby, L., & Sixsmith, A. (2016). Place-making with older persons: Establishing sense-of-place through participatory community mapping workshops. *Social Science and Medicine, 168*, 223-229. doi:10.1016/j.socscimed.2016.07.007

Fiori, K. L., Smith, J., & Antonucci, T. C. (2007). Social Network types among older adults: A multidimensional approach. *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences, 62*(6), 322-330.

Foster, P., & Neville, S. (2010). Women over the age of 85 years who live alone: a descriptive study. *Nursing Praxis in New Zealand, 26*(1), 4-13 10p.

Freestone, R., & Liu, E. (Eds.). (2016). *Place and Placelessness Revisted*. London and New Yourk: Routledge

Fry, J., Scammell, J., & Barker, S. (2017). Drowning in muddied waters or swimming downstream? A critical analysis of literature reviewing in a phenomenological study through an exploration of the lifeworld, reflexivity and role of the researcher. *Indo-Pacific Journal of Phenomenology, 17*(1), 1-12. doi:10.1080/20797222.2017.1293355

Gadamer, H.-G. (2004/2013). *Truth and Method*. London, United Kingdom: BloomsburyAcademic.

Garbrah, W., Välimäki, T., Palovaara, M., & Kankkunen, P. (2017). Nursing curriculums may hinder a career in gerontological nursing: An integrative review. *International Journal of Older People Nursing, 12*(3), e12152. doi:10.1111/opn.12152

Gardezi, F., Wilson, K., Man-Son-Hing, M., Marshall, S., Molnar, F., Dobbs, B., & Tuokko, H. (2006). Qualitative Research on Older Drivers. *Clinical Gerontologist, 30*(1), 5-22. doi:10.1300/J018v30n01_02

Gardner, P. (2011). Natural neighborhood networks: Important social networks in the lives of older adults aging in place. *Journal of Aging Studies, 25*(3), 263-271. doi:10.1016/j.jaging.2011.03.007

Garon, S., Paris, M., Beaulieu, M., Veil, A., & Laliberté, A. (2014). Collaborative partnership in age-friendly cities: Two case studies from Quebec, Canada. *Journal of Aging and Social Policy, 26*(1/2), 73-87. doi:10.1080/08959420.2014.854583

Garon, S., Veil, A., Paris, M., & Rémillard-Boilard, S. (2016). How can a research program enhance a policy? AFC-Quebec governance and evaluation opportunities. In M. T & G. S (Eds.), *Age-friendly cities and communities in international comparison. International perspectives on aging*. Switzerland: Springer, Cham. doi:10.1007/978-3-319-24031-2

Garrard, J. (2013). *Senior Victorians and walking: Obstacles and opportunities: Summary report*. Melbourne: Victoria Walks. Retrieved from www.victoriawalks,org,au

Gauvin, L., Richard, L., Kestens, Y., Shatenstein, B., Daniel, M., Moore, S., . . . Payette, H. (2012). Living in a well-serviced urban area is associated with maintenance of frequent walking among seniors in the VoisiNuAge study. *Journals of Gerontology: Series B, 67B*(1), 76-88. doi:10.1093/geronb/gbr134

Geiringer, C., & Palmer, M. (2007). Human rights and social policy in New Zealand. *Social Policy Journal of New Zealand*(30), 12-41.

Gell, N., Rosenberg, D., Carlson, J., Kerr, J., & Belza, B. (2015). Built environment attributes related to GPS measured active trips in mid-life and older adults with mobility disabilities. *Disability and Health Journal, 8*(2), 290-295. doi:10.1016/j.dhjo.2014.12.002

Gewurtz, R., Moll, S., Letts, L., Larivière, N., Levasseur, M., & Krupa, T. (2016). What you do every day matters: A new direction for health promotion. *Canadian Journal of Public Health, 107*(2), 205-208. doi:10.17269/cjph.107.5317

Gibson, S. (2018). "Let's go to the park.": An investigation of older adults in Australia and their motivations for park visitation. *Landscape and Urban Planning, 180*, 234-246. doi:10.1016/j.landurbplan.2018.08.019

Gidigbi, S. (2018). *Park and Recreation Inclusion Report*. Ashburn: United States: National Recreation and Park Association. Retrieved from www.nrpa.org/publications-research/research-papers/parks-and-recreation-inclusion-report

Giles-Corti, B., Bull, F., Knuiman, M., McCormack, G., Van Niel, K., Timperio, A., . . . Boruff, B. (2013). The influence of urban design on neighbourhood walking following residential relocation: Longitudinal results from the RESIDE study. *Social Science and Medicine, 77*, 20-30. doi:10.1016/j.socscimed.2012.10.016

Glicksman, A., Clark, K., Kleban, M., Ring, L., & Hoffman, C. (2014). Building an integrated research/policy planning age-friendly agenda. *Journal of Aging and Social Policy, 26*(1/2), 131-146. doi:10.1080/08959420.2014.854142

Glicksman, A., & Ring, L. (2017). Defining the goals of age-friendly interventions. *Journal of Housing for the Elderly, 31*(2), 93-98.

Goldman, L., Owusu, S., Smith, C., Martens, D., & Lynch, M. (2016). Age-friendly New York city: A case study. In T. Moulaert & S. Garon (Eds.), *Age-Friendly Cities And Communities In International Comparison, International Perspectives On Aging* doi:10.1007/978-3-319-24031-2_10

Grant, B. (2008). An insider's view on physical activity in later life. *Psychology of Sport and Exercise, 9*(6), 817-829. doi:10.1016/j.psychsport.2008.01.003

Grant, T., Edwards, N., Sveistrup, H., Andrew, C., & Egan, M. (2010). Neighborhood walkability: Older people's perspectives from four neighborhoods in Ottawa, Canada. *Journal of Aging and Physical Activity, 18*, 293-312.

Greenfield, E., Oberlink, M., Scharlach, A., Neal, M., & Stafford, P. (2015). Age-friendly community initiatives: Conceptual issues and key questions. *Gerontologist, 55*(2), 191-198. doi:10.1093/geront/gnv005

Haak, M., Fange, A., Horstmann, V., & Iwarsson, S. (2008). Two dimensions of participation in very old age and their relations to home and neighborhood environments. *American Journal of Occupational Therapy, 62*(1), 77-86.

Haak, M., Ivanoff, S., Fange, A., Sixsmith, J., & Iwarsson, S. (2007). Home as the locus and origin for participation: Experiences among very old Swedish people. *OTJR: Occupation, Participation and Health, 27*(3), 95-103.

Hamilton City Council. (2018). *Hamilton, New Zealand: A plan and process for becoming a more age-friendly city, 2018-1012*. Retrieved from https://www.hamilton.govt.nz/Pages/404.aspx?requestUrl=https://www.hamilton.govt.nz/our-city/community-development/Documents/Community.pdf

Hammer, M., de Oliveira, C., & Demakakos, P. (2014). Non-exercise physical activity and survival: English longitudinal study of ageing. *American Journal of Preventive Medicine, 47*(4), 452–460.

Hand, C., & Howrey, B. (2017a). Associations Among Neighborhood Characteristics, Mobility Limitation, and Social Participation in Late Life. *The Journals of Gerontology: Series B, 74*(3), 546-555. doi:10.1093/geronb/gbw215

Hand, C., & Howrey, B. (2017b). Associations among neighborhood characteristics, mobility limitation, and social participation in late life. *The Journals of Gerontology: Series B, 00*(00), 1-10. doi:10.1093/geronb/gbw215

Hand, C., McColl, M., Birtwhistle, R., Kotecha, J., Batchelor, D., & Hall Barber, K. (2014). Social isolation in older adults who are frequent users of primary care services. *Canadian Family Physician, 60*(6), 322-329.

Hand, C., Retrum, J., Ware, G., Iwasaki, P., Moaalii, G., & Main, D. (2017). Understanding social isolation among urban aging adults: Informing

occupation-based approaches. *OTJR: Occupation, Participation and Health, 37*(4), 188-198. doi:10.1177/1539449217727119

Hank, K., & Erlinghagen, M. (2009). Dynamics of volunteering in older Europeans. *The Gerontologist, 50*(2), 170-178. doi:10.1093/geront/gnp122

Hank, K., & Stuck, S. (2008). Volunteer work, informal help, and care among the 50+ in Europe: Further evidence for 'linked' productive activities at older ages. *Social Science Research, 37*(4), 1280-1291. doi:10.1016/j.ssresearch.2008.03.001

Harman, G. (2007). *Heidegger explained*. Chicago: Carus.

Harper, D. (2001). Online etymology dictionary. In *Online etymology dictionary*. Retrieved from https://www.etymonline.com

Heidegger, M. (1962/2008). *Being and Time* (M. J & E. Robinson, Trans., 7th ed.). New York, NY: Harper & Row.

Heidegger, M. (1971). Building Dwelling Thinking (A. Hofstadter, Trans.). In *Poetry. Language, Through*. New York: Harper Row.

Hinrichs, T., Bucher, B., Wilm, S., Klassen-Mielke, R., Brach, M., Platen, P., & Moschny, A. (2015). Adverse events in mobility-limited and chronically ill elderly adults participating in an exercise intervention study supported by general practitioner practices. *Journal American Geriatric Society, 63*(2), 258-269. doi:10.1111/jgs.13253

Hinterlong, J. (2008). Productive engagement among older Americans: Prevalence, patterns, and implications for public policy. *Journal of Aging and Social Policy, 20*(2), 141-164. doi:10.1080/08959420801977491

Hirsch, J., Moore, K., Clarke, P., Rodriguez, D., Evenson, K., Brines, S., . . . Diez Roux, A. (2014). Changes in the built environment and changes in the amount of walking over time: Longitudinal results from the multi-ethnic study of atherosclerosis. *American Journal of Epidemiology, 180*(8), 799-809. doi:10.1093/aje/kwu218

Hogan, A. (2017, September 5). Amy Hogan, spokesperson for Disability Alliance, In Nine to Noon with Kathryn Ryan *[Radio Broadcast]*. Wellington, New Zealand: Radio RNZ.

Holland, C., Clark, A., Katz, J., & Peace, S. (2007). *Social interactions in urban public places*. Bristol, United Kingdom: Joseph Rowntree Foundation.

Holt-Lunstad, J., Smith, T., Baker, M., Harris, T., & Stephenson, D. (2015). Loneliness and social isolation as risk factors for mortality: A meta-analytic review. *Perspectives on Psychological Science, 10*, 227-237. doi:10.1177/1745691614568352

Hooper, P., Foster, S., Nathan, A., & Giles-Corti , B. (2012). Built environmental supports for walking. In B. Ainsworth & C. Macera (Eds.), *Physical activity and public health practice*. Boca Raton, FL CRC Press (Taylor and Francis Group).

Hooper, P., Knuiman, M., Bull, F., Jones, E., & Giles-Corti, B. (2015). Are we developing walkable suburbs through urban planning policy?: Identifying the mix of design requirements to optimise walking outcomes from the 'Liveable Neighbourhoods' planning policy in Perth, Western Australia. *The International Journal of Behavioral Nutrition and Physical Activity, 12*, 63-74. doi:10.1186/s12966-015-0225-1

Hopkins, P., & Pain, R. (2007). Geographies of age: Thinking relationally. *Area, 39*(3), 287-294.

Horrigan-Kelly, M., Millar, M., & Dowling, M. (2016). Understanding the key tenets of Heidegger's philosophy for interpretive phenomenological research. *International Journal of Qualitative Methods, 15*(1), 1-8. doi:10.1177/1609406916680634

Hovbrandt, P., Fridlund, B., & Carlsson, G. (2007). Very old people's experience of occupational performance outside the home: Possibilities and limitations. *Scandinavian Journal of Occupational Therapy, 14*(2), 77-85. doi:10.1080/11038120600773013

Inwood, M. E. (1999). *A Heidegger Dictionary*. Oxford: Blackwell.

Iwarsson, S., Horstmann, V., Carlsson, G., Oswald, F., & Wahl, H. W. (2009). Person-environment fit predicts falls in older adults better than the consideration of environmental hazards only. *Clinical Rehabilitation, 23*(6), 558-567. doi:10.1177/0269215508101740

Iwarsson, S., Wahl, H.-W., Nygren, C., Oswald, F., Sixsmith, A., Sixsmith, J., . . . Tomsone, S. (2007). Importance of the home environment for healthy aging: Conceptual and methodological background of the European ENABLE–AGE project. *The Gerontologist, 47*(1), 78-84.

Jacobs, J. (1961). *The death and life of great American cities*. Westminster, United Kingdom: Vintage.

Jeste, D., Blazer Ii, D., Buckwalter, K., Cassidy, K., Fishman, L., Gwyther, L., . . . Feather, J. (2016). Age-Friendly Communities initiative: Public health approach to promoting successful aging. *The American Journal of Geriatric Psychiatry, 24*(12), 1158-1170. doi:10.1016/j.jagp.2016.07.021

Jette, A. M., Keysor, J., Coster, W., Ni, P., & Haley, S. (2005). Beyond function: predicting participation in a rehabilitation cohort. *Archives of Physical Medicine and Rehabilitation, 86*.

John, D., & Gunter, K. (2015). engAGE in community: Using mixed methods to mobilize older people to elucidate the age-friendly attributes of urban and rural places. *Journal of Applied Gerontology, 1*(26), 1095-1120. doi:10.1177/0733464814566679

Johnson, A., & Glover, T. (2013). Understanding urban public space in a leisure context. *Leisure Sciences, 35*(2), 190-197. doi:10.1080/01490400.2013.761922

Julien, D., Gauvin, L., Richard, L., Kestens, Y., & Payette, H. (2013). The role of social participation and walking in depression among older adults: Results from the VoisiNuAge study. *Canadian Journal of Aging, 32*(1), 1-12. doi:10.1017/S071498081300007X

Kalfoss, M. (2017). Attitudes to ageing among older Norwegian adults living in the community. *British Journal of Community Nursing, 22*(5), 238-245. doi:10.12968/bjcn.2017.22.5.238

Kaźmierczak, A. (2013). The contribution of local parks to neighbourhood social ties. *Landscape and Urban Planning, 109*(1), 31-44. doi:10.1016/j.landurbplan.2012.05.007

Keating, N., Eales, J., & Phillips, J. (2013). Age-friendly rural communities: Conceptualizing 'best-fit'. *Canadian Journal on Aging, 32*(4), 319-332. doi:10.1017/S0714980813000408

Kemperman, A., & Timmermans, H. (2014). Green spaces in the direct living environment and social contacts of the aging population. *Landscape and Urban Planning, 129*, 44-54. doi:10.1016/j.landurbplan.2014.05.003

Khetani, M., & Coster, W. (2007). Clarifying the construction of ICF participation to support measurement *OTJR: Occupation, Participation & Health, 27*(Supplement), 835.

King, M. (2001). *A guide to Heidegger's Being and Time*. Albany, New York: State University of New York Press.

Koch, T. (1996). Implementation of a hermeneutic inquiry in nursing: Philosophy, rigour and representation. *Journal of Advanced Nursing, 24*, 174-184.

Kourtit, K., Nijkamp, P., & Reid, N. (2014). The new urban world: Challenges and policy. *Applied Geography, 49*, 1-3. doi:10.1016/j.apgeog.2014.01.007

Lager, D., Van Hoven, B., & Huigen, P. (2015). Understanding older adults' social capital in place: Obstacles to and opportunities for social contacts in the neighbourhood. *Geoforum, 59*, 87-97. doi:10.1016/j.geoforum.2014.12.009

Larsen, S., & Johnson, J. (2012). Toward an open sense of place: Phenomenoloy, affinity, and the question of Being. *Annals of the Association of American Geographers, 102*(3), 632-646. doi:10.1080/00045608.2011.600196

Lauf, S., Haase, D., & Kleinschmit, B. (2016). The effects of growth, shrinkage, population aging and preference shifts on urban development: A spatial scenario analysis of Berlin, Germany. *Land Use Policy, 52*, 240-254. doi:10.1016/j.landusepol.2015.12.017

Laverty, S. (2003). Heremeneutic phenomenology and phenomenology: A comparison of historical and methodological consideration. *International Journal of Qualitative Methods, 2*(3), 21-35.

Lawton, M. (1986). *Environment and aging* (2nd ed.). Monterey: Brooks/Cole.

Lawton, M., & Nahemow, L. (1973). Ecology and the ageing process. In C. Eisdorpher & M. Lawton (Eds.), *Psychology and adult development and aging* (pp. 619-674). Washington, DC: American Psychological Association.

Lehning, A., & Greenfield, E. (2017). Research on age-friendly community initiatives: Taking stock and moving forward. *Journal of Housing for the Elderly, 2*(31), 178-192. doi:10.1080/02763893.2017.1309937

Lehning, A., Smith, R., & Dunkle, R. (2014). Age-friendly environments and self-rated health: An exploration of Detroit elders. *Research on Aging, 36*(1), 72-94. doi:10.1177/0164027512469214

Lehning, A., Smith, R., & Dunkle, R. (2015). Do age-friendly characteristics influence the expectation to age in place? A comparison of low-income and higher income Detroit elders. *Journal of Applied Gerontology, 34*(2), 158-180. doi:10.1177/0733464813483210

Leung, G. T. Y., Fung, A. W. T., Tam, C. W. C., Lui, V. W. C., Chiu, H. F. K., Chan, W. M., & Lam, L. C. W. (2011). Examining the association between late-life leisure activity participation and global cognitive decline in community-dwelling elderly Chinese in Hong Kong. *International Journal of Geriatric Psychiatry, 26*(1), 39-47. doi:10.1002/gps.2478

Levasseur, M., Cohen, A., Dubois, M., Généreux, M., Richard, L., Therrien, F., & Payette, H. (2015). Environmental factors associated with social participation of older adults living in metropolitan, urban, and rural areas: The NuAge

study. *American Journal of Public Health, 105*(8), 1718-1725.
doi:10.1007/s10433-005-0019-4

Levasseur, M., Dubois, M.-F., Généreux, M., Menec, V., Raina, P., Roy, M., . . . St-
Pierre, C. (2017). Capturing how age-friendly communities foster positive
health, social participation and health equity: A study protocol of key
components and processes that promote population health in aging
Canadians. *BMC Public Health, 17*(1), 502. doi:10.1186/s12889-017-4392-7

Levasseur, M., Gauvin, L., Richard, L., Kestens, Y., Daniel, M., & Payette, H.
(2011). Associations between perceived proximity to neighborhood
resources, disability, and social participation among community-dwelling
older adults: Results from the VoisiNuAge study. *Archives of Physical
Medicine and Rehabilitation, 92*, 1979-1986. doi:10.1016/j.apmr.2011.06.035

Levasseur, M., Généreux, M., Bruneau, J.-F., Vanasse, A., Chabot, É., Beaulac, C.,
& Bédard, M.-M. (2015). Importance of proximity to resources, social
support, transportation and neighborhood security for mobility and social
participation in older adults: Results from a scoping study. *BMC Public
Health, 15*(1), 503-522. doi:10.1186/s12889-015-1824-0

Levasseur, M., Richard, L., Gauvin, L., & Raymond, E. (2010). Inventory and
analysis of definitions of social participation found in the aging literature:
Proposed taxonomy of social activities. *Social Science and Medicine, 71*(12),
2141-2149. doi:10.1016/j.socscimed.2010.09.041

Lewenson, S., & Truglio-Londrigan, M. (Eds.). (2017). *Practicing primary health
care in nursing: Caring for populations* (9781284078107): Burlington: Jones
& Bartlett Learning.

Li, T., & Zhang, Y. (2015). Social networks type and the health of older adults:
Exploring reciprical associations. *Social Science and Medicine, 130*, 59-68.
doi:10.1016/j.socscimed.2015.02.007

Lien, L. L., Steggell, C. D., & Iwarsson, S. (2015). Adaptive strategies and person-
environment fit among functionally limited older adults aging in place: A

mixed methods approach. *International Journal of Environmental Research and Public Health, 12*(9), 11954-11974. doi:10.3390/ijerph120911954

Lincoln, Y., & Guba, E. (1985). *Naturalistic inquiry*. Newbury Park, California: Sage Publishing.

Lindemann, H. (2014). *Holding and letting go: The social practice of personal identities*. Oxford: University Press.

Lingis, A. (2017). What is given in experience: The phenomenological account. *Qualitative Health Research, 27*(6), 805-809. doi:10.1177/1049732317698959

Liu, Y.-e., Norman, I., & While, A. (2013). Nurses' attitudes towards older people: A systematic review. *International Journal of Nursing Studies, 50*(9), 1271-1282. doi:10.1016/j.ijnurstu.2012.11.021

Lord, S., Després, C., & Ramadier, T. (2011). When mobility makes sense: A qualitative and longitudinal study of the daily mobility of the elderly. *Journal of Environmental Psychology, 31*(1), 52-61. doi:10.1016/j.jenvp.2010.02.007

Lui, C., Everingham, J., Warburton, J., Cuthill, M., & Bartlett, H. (2009). What makes a community age-friendly: A review of international literature. *Australasian Journal of Ageing, 28*(3), 116-121. doi:10.1111/j.1741-6612.2009.00355.x

Mackett, R., & Thoreau, R. (2015). Transport, social exclusion and health. *Journal of Transport & Health, 2*(4), 610-617. doi:10.1016/j.jth.2015.07.006

Mackey, S. (2005). Phenomenological nursing research: Methodological insights derived from Heidegger's interpretive phenomenology. *International Journal Nursing Studies, 42*(2), 179-186. doi:10.1016/j.ijnurstu.2004.06.011

Malpas, J. (2006). *Heidegger's topology: Being, place, world*. Cambridge, Mass: MIT Press.

Marchand, I. (2018). Stories of contemporary aging: An analysis of "lived" citizenship in later life. *Journal of Gerontological Social Work, 61*(5), 472-491. doi:10.1080/01634372.2017.1420001

Marion, J. (2002). *Being given: Toward a phenomenology of giveness*. Stanford, CA: Stanford University Press.

Marquet, O., Hipp, J., & Miralles-Guasch, C. (2017). Neighborhood walkability and active ageing: A difference in differences assessment of active transportation over ten years. *Journal of Transport & Health, 7*, 190-201. doi:10.1016/j.jth.2017.09.006

Marquet, O., & Miralles-Guasch, C. (2015a). Neighbourhood vitality and physical activity among the elderly: The role of walkable environments on active ageing in Barcelona, Spain. *Social Science and Medicine, 135*, 24-30. doi:10.1016/j.socscimed.2015.04.016

Marquet, O., & Miralles-Guasch, C. (2015b). The walkable city and the importance of the proximity environments for Barcelona's everyday mobility. *Cities, 42*(Part B), 258-266. doi:10.1016/j.cities.2014.10.012

Martinez, I., Crooks, D., Kim, K., & Tanner, E. (2011). Invisible civic engagement among older adults: Valuing the contributions of informal volunteering. *Journal of Cross-Cultural Gerontology, 26*(1), 23-37. doi:10.1007/s10823-011-9137-y

Martinson, M., & Minkler, M. (2006). Civic engagement and older adults: A critical perspective. *The Gerontologist, 46*(3), 318 -324. doi:10.1093/geront/46.3.318

McNeill, W. (1992). *The concept of time: Martin Heidegger*. Oxford, United Kingdom: Blackwell Publishers.

Means, R. (2007). Safe as houses? Ageing in place and vulnerable older people in the UK. *Social Policy & Adminstration, 41*(1), 65-85.

Menec, V. (2017). Conceptualizing social connectivity in the context of age-friendly communities. *Journal of Housing for the Elderly, 31*(2), 99-116. doi:10.1080/02763893.2017.1309926

Menec, V., Hutton, L., Newall, N., Nowicki, S., Spina, J., & Veselyuk, D. (2015). How 'age-friendly' are rural communities and what community characteristics are related to age-friendliness? The case of rural Manitoba, Canada. *Ageing & Society, 35*(1), 203-223 doi:10.1017/S0144686X13000627

Menec, V., Means, R., Keating, N., Parkhurst, G., & Eales, J. (2011). Conceptualizing age-friendly communities. *Canadian Journal on Aging, 30*(3), 479-493. doi:10.1017/S0714980811000237

Menec, V., Novek, S., Veselyuk, D., & McArthur, J. (2014). Lessons learned from a Canadian province-wide age-friendly initiative: The age-friendly Manitoba initiative. *Journal of Aging and Social Policy, 26*(1-2), 33-51. doi:10.1080/08959420.2014.854606

Ministry of Health. (2001). *The Health of Older People Strategy*. Wellington, New Zealand: Ministry of Health. Retrieved from https://www.health.govt.nz/publication/health-older-people-strategy-2002

Ministry of Health. (2016a). *Healthy Ageing Strategy*. Retrieved from https://www.health.govt.nz/publication/healthy-ageing-strategy. doi:978-0-947515-85-0 (online)

Ministry of Health. (2016b). *New Zealand Health Strategy: Future direction*. Wellington, New Zealand: Ministry of Health. Retrieved from https://www.health.govt.nz/system/files/documents/publications/new-zealand-health-strategy-futuredirection-2016-apr16.pdf

Ministry of Social Development. (2001). *New Zealand Positive Ageing Strategy (2001)*. Retrieved from www.osc.govt.nz

Ministry of Social Development. (2007). *Positive ageing indicators 2007*. Retrieved from https://www.msd.govt.nz/documents/about-msd-and-our-

work/publications-resources/monitoring/postive-age-indicators/positive-ageing-indicators-2007.pdf

Ministry of Social Development. (2013). *Older New Zealanders: Healthy, independent, connected and respected*. New Zealand. Retrieved from www.msd.govt.nz/oldernewzealanders

Ministry of Social Development. (2015). *2014 Report on the Positive Ageing Strategy*. Wellington, New Zealand: Ministry of Social Development. Retrieved from www.osc.govt.nz

Ministry of Social Development. (2016a). *New Zealand Disability Strategy 2016-2026*. Retrieved from https://msd.govt.nz. doi: 978-0-947513-56 (online)

Ministry of Social Development. (2016b). *The Social Report 2016*. Retrieved from http://www.socialreport.msd.govt.nz/

Ministry of Social Development. (2018). *Public Housing Plan 2018–2022*. Wellington, New Zealand: Ministry of Social Development. Retrieved from https://www.msd.govt.nz

Moran, M., Van Cauwenberg, J., Hercky-Linnewiel, R., Cerin, E., Deforche, B., & Plaut, P. (2014). Understanding the relationships between the physical environment and physical activity in older adults: A systematic review of qualitative studies. *The International Journal of Behavioral Nutrition and Physical Activity, 11*(79-91). doi:10.1186/1479-5868-11-79

Moran, M., Werner, P., Doron, I., HaGani, N., Benvenisti, Y., King, A., . . . Ergon, S. (2017). Exploring the objective and perceived environmental attributes of older adults' neighborhood walking routes: A mixed methods analysis. *Journal of Aging and Physical Activity, 25*, 420-431. doi:10.1123/japa.2016-0165

Morrow-Howell, N., Hinterlong, J., Rozario, P., & Tang, F. (2003). Effects of volunteering on the well-being of older adults. *The Journals of Gerontology: Series B, 58*(3), S137-S145. doi:10.1093/geronb/58.3.S137

Morrow-Howell, N., Hong, S.-L., & Tang, F. (2009). Who benefits from volunteering? Variations in perceived benefits. *The Gerontologist, 49*(1), 91-102. doi:10.1093/geront/gnp007

Morse, J. (2012). *Qualitative health research: Creating a new discipline*. Retrieved from http://ebookcentral.proquest.com/lib/aut/detail.action?docID=1017563

Moulaert, T., & Garon, S. (2015). Researchers behind policy development: Comparing 'Age-Friendly Cities' models in Quebec and Wallonia. *Journal of Social Work Practice, 29*(1), 23-35. doi:10.1080/02650533.2014.993946

Moulaert, T., & Garon, S. (2016). Introduction: Toward a Better Understanding of AFCC [Moulaert2016]. In T. Moulaert & S. Garon (Eds.), *Age-friendly cities and communities in international comparison: Political lessons, scientific avenues, and democratic issues* (pp. 1-16). Switzerland: Springer International Publishing. Retrieved from https://doi.org/10.1007/978-3-319-24031-2_1. doi:10.1007/978-3-319-24031-2_1

Murata, C., Kondo, T., Tamakoshi, K., Yatsuya, H., & Toyoshima, H. (2006). Factors associated with life space among community-living rural elders in Japan. *Public Health Nursing, 23*(4), 324-331.

Nation, M., Fortney, T., & Wandersman, A. (2010). Race, place and neighboring: Social ties among neighbors in urban, suburban and rural contexts. *Environment and Behaviour, 42*(5), 581-596. doi:10.1177/0013916508328599

Neville, S., Adams, J., Napier, S., Shannon, K., & Jackson, D. (2018). "Engaging in my rural community": Perceptions of people aged 85 years and over. *International Journal of Qualitative Studies on Health and Well-being, 13*(1), 1503908. doi:10.1080/17482631.2018.1503908

Neville, S., Napier, S., Adams, J., Wham, C., & Jackson, D. (2016). An integrative review of the factors related to building age-friendly rural communities. *Journal of Clinical Nursing, 25*, 2402- 2412.

Nordgren, K. (2016). How to do things with history: Use of history as a link between historical consciousness and historical culture. *Theory & Research in Social Education, 44*(4), 479-504. doi:10.1080/00933104.2016.1211046

Novek, S., & Menec, V. (2014). Older adults' perceptions of age-friendly communities in Canada: A photovoice study. *Ageing and Society, 34*(6), 1052-1072. doi:10.1017/S0144686X1200150X

Nyman, S., Ballinger, C., Phillips, J., & Newton, R. (2013). Characteristics of outdoor falls among older people: A qualitative study. *BMC Geriatrics, 13*(125-139).

Nyqvist, F., Cattan, M., Andersson, L., Forsman, A. K., & Gustafson, Y. (2013). Social capital and loneliness among the very old living at home and in institutional settings: A comparative study. *Journal of Aging and Health, 25*(6), 1013-1035. doi:10.1177/0898264313497508

Office for Senior Citizens. (2014). *2014 report on the Positive Ageing Strategy*. Wellington, New Zealand: Office for Senior Citizens. doi:978-0-478-32369-6 (online)

Ory, M. G., Towne, S. D., Won, J., Forjuoh, S. N., & Lee, C. (2016). Social and environmental predictors of walking among older adults. *BMC Geriatrics, 16*(1), 155. doi:10.1186/s12877-016-0327-x

Oswald, F., Jopp, D., Rott, C., & Wahl, H. W. (2011). Is aging in place a resource for or risk to life satisfaction? *Gerontologist, 51*(2), 238-250. doi:10.1093/geront/gnq096

Ottoni, C., Sims-Gould, J., Winters, M., Heijnen, M., & McKay, H. (2016). "Benches become like porches": Built and social environment influences on older adults' experiences of mobility and well-being. *Social Science and Medicine, 169*, 33-41. doi:10.1016/j.socscimed.2016.08.044

Oxley, J., Langford, J., & Charlton, J. (2010). The safe mobility of older drivers: A challenge for urban road designers. *Journal of Transport Geography, 18*(5), 642-648. doi:10.1016/j.jtrangeo.2010.04.005

Ozanne, E., Biggs, S., & Kurowski, W. (2014). Competing frameworks in planning for the aged in the growth corridors of Melbourne. *Journal of Aging and Social Policy, 26*(1-2), 147-165. doi:10.1080/08959420.2014.860311

Peace, S., Holland, C., & Kellaher, L. (2005). Making space for identity. In G. Andrews & D. Phillips (Eds.), *Aging and place: Policy, perspectives, practice*. New York: Routledge.

Peace, S., Holland, C., & Kellaher, L. (2011). 'Option recognition' in later life: Variations in ageing in place. *Ageing and Society, 31*(5), 734-757. doi:10.1017/S0144686X10001157

Phillips, D., Siu, O., Yeh, A., & Cheng, K. (2005). Ageing and the urban environment. In J. Andrews & D. Phillips (Eds.), *Ageing and place* (pp. 147-163). Abingdon, United Kingdom: Routledge.

Phillips, J., Walford, N., & Hockey, A. (2011). How do unfamiliar environments convey meaning to older people? *Ageing & Later Life, 6*(2), 73-102. doi:10.3384/ijal.1652-8670.116273

Phillips, J., Walford, N., Hockey, A., Foreman, N., & Lewis, M. (2013). Older people and outdoor environments: Pedestrian anxieties and barriers in the use of familiar and unfamiliar spaces. *Geoforum, 47*, 113-124. doi:10.1016/j.geoforum.2013.04.002

Phillipson, C. (2004). Urbanisation and ageing: Towards a new environmental gerontology. *Ageing and Society, 24*(6), 963-972.

Phillipson, C. (2007). The 'elected' and the 'excluded': Sociological perspectives on the experience of place and community in old age. *Ageing and Society, 27*(3), 321-342. doi:10.1017/S0144686X06005629

Phillipson, C. (2010). Ageing and urban society: Growing old in the 'century of the city'. In D. Dannefer & C. Phillipson (Eds.), *The SAGE handbook of social gerontology* (pp. 597-606). London: Sage.

Phillipson, C. (2014). Developing age-friendly urban communities: Critical issues for public policy. *Public Policy & Aging Report, 25*(1), 4-8. doi:10.1093/ppar/pru052

Phillipson, C. (2018). Developing age-friendly work in the twenty-first century: New challenges and agendas. *Working with Older People, 22*(1), 3-8. doi:10.1108/WWOP-12-2017-0037

Plouffe, L., & Kalache, A. (2010). Towards global age-friendly cities: Determining urban features that promote active aging. *Journal Of Urban Health: Bulletin of the New York Academy of Medicine, 87*(5), 733-739. doi:10.1007/s11524-010-9466-0

Plouffe, L., Kalache, A., & Voelcker, I. (2016). A critical review of the WHO age-friendly cities methodology and its implementation. In T. Moulaert & S. Garon (Eds.), *Age-friendly cities and communities in international comparison* (pp. 19-36). doi:10.1007/978-3-319-24031-2_2

Portegijs, E., Rantakokko, M., Viljanen, A., Rantanen, T., & Iwarsson, S. (2017). Perceived and objective entrance-related environmental barriers and daily out-of-home mobility in community-dwelling older people. *Archives of Gerontology and Geriatrics, 69*, 69-76. doi:10.1016/j.archger.2016.11.011

Provencher, V., Mortenson, W., Tanguay-Garneau, L., Bélanger, K., & Dagenais, M. (2014). Challenges and strategies pertaining to recruitment and retention of frail elderly in research studies: A systematic review. *Archives of Gerontology and Geriatrics, 59*(1), 18-24. doi:10.1016/j.archger.2014.03.006

Quay, J. (2016). Learning phenomenology with Heidegger: Experiencing the phenomenological 'starting point' as the beginning of phenomenological research. *Educational Philosophy and Theory, 48*(5), 484-497. doi:10.1080/00131857

Rantakokko, M., Isarsson, S., Vahaluoto, S., Portegijs, E., Viljanen, A., & Rantanen, T. (2014). Perceived environmental barriers to outdoor mobility and feelings of loneliness among community-dwellling older people. *The Journal of Geronology, 69*(12), 1562-1568. doi:10.1093/gerona/glu069

Rantakokko, M., Iwarsson, S., Kauppinen, M., Leinonen, R., Heikkinen, E., & Rantanen, T. (2010). Quality of life and barriers in the urban outdoor environment in old age. *Journal of the American Geriatrics Society, 58*(11), 2154-2159. doi:10.1111/j.1532-5415.2010.03143.x

Rantakokko, M., Iwarsson, S., Manty, M., Leinonen, R., & Rantanene, T. (2012). Perceived barriers in the outdoor environment and development of walking difficulties in older people. *Age and Ageing, 41*(1), 118-121. doi:10.1093/ageing/afr136

Rantakokko, M., Manty, M., Iwarsson, S., Tormakangas, T., Leinonen, R., Heikkinen, E., & Rantanen, T. (2009). Fear of moving outdoors and development of outdoor walking difficulty in older people. *Journal of the American Geriatrics Society, 57*(4), 634-640. doi:10.1111/j.1532-5415.2009.02180.x

Raymond, E., & Grenier, A. (2013). Participation in Policy Discourse: New Form of Exclusion for Seniors with Disabilities? *Canadian Journal on Aging, 32*(2), 117-129. doi:10.1017/S0714980813000135

Relph, E. (1976). *Place and placelessness*. London, United Kingdom: Pion.

Rémillard-Boilard, Buffel, T., & Phillipson, C. (2017). Involving older residents in age-friendly developments: From information to coproduction mechanisms. *Journal of Housing for the Elderly, 31*(2), 146-159. doi:10.1080/02763893.2017.1309932

Remillard-Boilard, S. (2018). The development of age-friendly cities and communities. In T. Buffel & S. Handler (Eds.), *Age-friendly cities and communities: A global perspective* (pp. 13- 32). Retrieved from ProQuest Ebook Central, https://ebookcentral.proquest.com/lib/AUT/detail.action?docID=5349381.

Richard, L., Gauvin, L., Gosselin, C., & Laforest, S. (2009). Staying connected: neighbourhood correlates of social participation among older adults living in an urban environment in Montréal, Quebec. *Health Promotion International, 24*(1), 46-57. doi:10.1093/heapro/dan039

Richard, L., Gauvin, L., Kestens, Y., Shatenstein, B., Payette, H., Daniel, M., & . .
.Mercille, G. (2013). Neighborhood resources and social participation among
older adults: Results from the VoisiNuAge study. *Journal of Aging and
Health, 25*(2), 296-318. doi:10.1177/0898264312468487

Risser, R., Haindl, G., & Ståhl, A. (2010). Barriers to senior citizens' outdoor
mobility in Europe. *European Journal of Ageing & Society, 7*(69-80).
doi:10.1007/s10433-010-0146-4

Rochette, A., Korner-Bitensky, N., & Levasseur, M. (2006). 'Optimal' participation:
A reflective look. *Disability and Rehabilitation, 28*, 1231-1235.

Rodgers, V., & Gilmour, J. (2011). Shaping student nurses' attitudes towards older
people through learning and experience. *Nursing Praxis in New Zealand,
27*(3), 13-20.

Rosenberg, D. E., Huang, D. L., Simonovich, S. D., & Belza, B. (2013). Outdoor
built environment barriers and facilitators to activity among midlife and older
adults with mobility disabilities. *Gerontologist, 53*(2), 268-279.
doi:10.1093/geront/gns119

Rosso, A., Auchincloss, A., & Michael, Y. (2011). The urban built environment and
mobility in older adults: A comprehensive review. *Journal of Aging
Research, 2011*, 1-10. doi:10.4061/2011/816106

Rosso, A., Taylor, J., Philip Tabb, L., & Michael, Y. (2013). Mobility, disability, and
social engagement in older adults. *Journal of Aging and Health, 25* (4), 617-
637.

Rowles, G. (1978). *Prisoners of space?* Boulder, CO: Westview.

Rowles, G. (1993). Evolving images of place in aging and `Aging in Place'.
Generations, 17(2), 65.

Rowles, G., & Bernard, M. (2013). *Environmental gerontology: Making meaningful
places in old age*. New York, NY: Springer Publishing Company.

Rush, K., Hickey, S., Epp, S., & Janke, R. (2017). Nurses' attitudes towards older people care: An integrative review. *Journal of Clinical Nursing, 26*(23-24), 4105-4116. doi:10.1111/jocn.13939

Ryan, M., Hutchison, R., & Gottdiener, M. (2018). *The new urban sociology*. Retrieved from http://ebookcentral.proquest.com/lib/aut/detail.action?docID=1754270

Rydin, Y. (2012). Healthy cities and planning. *The Town Planning Review, 83*(4). doi:10.3828/tpr.2012.24

Sampson, R., & Graif, C. (2009). Neighborhood social capital as differential social organization: Resident and leadership dimensions. *American Behavioral Scientist, 52*(11), 1579-1605. doi:10.1177/0002764209331527

Scharf, T., & Keating, N. (2012). *From excluson to inclusion in old age: A global challenge*. Retrieved from https://ebookcentral.proquest.com/lib/aut/detail.action?docID=981518

Scharf, T., Phillipson, C., & Smith, A. (2005). Social exclusion of older people in deprived urban communities of England. *European Journal of Ageing, 2*(2), 76-87. doi:10.1007/s10433-005-0025-6

Scharlach, A., & Lehning, A. (2013). Age-friendly communities and social inclusion in the United States of America. *Ageing & Society, 33*(1), 110-136. doi:10.1017/S0144686X12000578

Schwanen, I., & Ziegler, F. (2011). Wellbeing, independence and mobility: An introduction. *Ageing and Society, 31*(5), 719-733. doi:10.1017/S0144686X10001467

Schwarz, N. (2010). Urban form revisited-Selecting indicators for characterising European cities. *Landscape and Urban Planning, 96*(1), 29-47. doi:10.1016/j.landurbplan.2010.01.007

Scott, S. (2009). *Making sense of everyday life*. Cambridge, UK: Polity Press.

Seaman, P. (2012). Time for my life now: Early Boomer women's anticipation of volunteering in retirement. *Gerontologist, 52*(2), 245-254. doi:10.1093/geront/gns001

Silveirinha de Oliveira, E., Aspinall, P., Briggs, A., Cummins, S., Leyland, A., Mitchell, R., . . . Ward Thompson, C. (2013). How effective is the Forestry Commission Scotland's woodland improvement programme—'Woods In and Around Towns' (WIAT)—at improving psychological well-being in deprived urban communities? A quasi-experimental study. *British Medical Journal Open, 3*(8), 36-48. doi:10.1136/bmjopen-2013-003648

Sixsmith, J., Sixsmith, A., Fänge, A. M., Naumann, D., Kucsera, C., Tomsone, S., . . . Woolrych, R. (2014). Healthy ageing and home: The perspectives of very old people in five European countries. *Social Science and Medicine, 106*, 1-9. doi:10.1016/j.socscimed.2014.01.006

Smetcoren, A., De Donder, L., Duppen, D., De Witte, N., Vanmechelen, O., & Verte, D. (2018). Towards an 'active caring community' in Brussels. In T. Buffel & S. Handler (Eds.), *Age-friendly cities and communities: A global perspective* (pp. 97-119): Policy Press. Retrieved from http://ebookcentral.proquest.com/lib/aut/detail.action?docID=5349381

Smith, A. (2009). *Ageing in urban neighbourhoods: Place attachment and social exclusion*

Smith, G., Gidlow, C., Davey, R., & Foster, C. (2010). What is my walking neighbourhood? A pilot study of English adults' definitions of their local walking neighbourhoods. *International Journal of Behavioral Nutrition and Physical Activity, 7*(34), 1-8. doi:10.1186/1479-5868-7-34

Smith, J., & Cartlidge, M. (2011). Place attachment among retirees in Greensburg,

Kansas. *Geographical Review, 101*, 536-555. doi:doi.org/10.1111/j.1931-0846.

Smith, R., Lehning, A., & Dunkle, R. (2013). Conceptualizing age-friendly community characteristics in a sample of urban elders: An exploratory factor

analysis. *Journal of Gerontological Social Work, 56*(2), 90-111. doi:10.1080/01634372.2012.739267

Smythe, E., Ironside, P., Sims, S., Swenson, M., & Spence, D. (2008). Doing Heideggerian hermeneutic research: A discussion paper. *International Journal of Nursing Studies, 45*(9), 1389-1397. doi:10.1016/j.ijnurstu.2007.09.005

Smythe, E., & Spence, D. (2012). RE-viewing literature in hermeneutic research. *International Institute for Qualitative Methods, 11*(1), 12-25. doi:10.1177/160940691201100102

Spence, D. (2005). Hermeneutic notions augment cultural safety education. *Cultural Safety, 44*(9).

Spina, J., & Menec, V. (2015). What community characteristics help or hinder rural communities in becoming age-friendly? Perspectives from a Canadian prairie province. *Journal of Applied Gerontology, 34*(4), 444-464. doi:10.1177/0733464813496164

Stahl, A., Carlsson, G., Hovbrandt, P., & Iwarsson, S. (2008). "Let's go for a walk!": identification and prioritisation of accessibility and safety measures involving elderly people in a residential area. *European Journal of Ageing, 5*(3), 265-273. doi:10.1007/s10433-008-0091-7

Statistics New Zealand. (2014). *National Population Projections: 2014(base)–2068* (Report No. ISSN 1178-0584): Statistics New Zealand. Retrieved from www.stats.govt.nz

Stephens, C., Breheny, M., & Mansvelt, J. (2015). Volunteering as reciprocity: Beneficial and harmful effects of social policies to encourage contribution in older age. *Journal of Aging Studies, 33*, 22-27. doi:10.1016/j.jaging.2015.02.003

Stones, D., & Gullifer, J. (2016). 'At home it's just so much easier to be yourself': Older adults' perceptions of ageing in place. *Ageing and Society, 36*(3), 449-481. doi:10.1017/S0144686X14001214

Stroh, K. (2015). Intersubjectivity of Dasein in Heidegger's Being and Time: How authenticity is a return to community. *Human Studies, 38*(2), 243–259. doi:10.1007/s10746-015-9341-9

Tang, F., Morrow-Howell, N., & Choi, E. (2010). Why do older adult volunteers stop volunteering? *Ageing and Society, 30*(5), 859-878. doi:10.1017/S0144686X10000140

Therrien, F., & Desrosiers, J. (2010). Participation of metropolitan, urban and rural community-dwelling older adults. *Archives of Gerontology and Geriatrics*, 51-56. doi:10.1016/j.archger.2009.11.017

Thomas, W., & Blanchard, J. (2009). Moving beyond place: Aging in community. *Generations, 33*(2), 12-17.

Thomese, F., Buffel, T., & Phillipson, C. (2018). Neighbourhood change, social inequlities and age-friendly communities. In T. Buffel & S. Handler (Eds.), *Age-friendly cities and communities: A global perspective*. Retrieved from http://ebookcentral.proquest.com/lib/aut/detail.action?docID=5349381

Torres, S., & Hammarström, G. (2006). Speaking of 'limitations' while trying to disregard them: A qualitative study of how diminished everyday competence and aging can be regarded. *Journal of Aging Studies, 20*(4), 291-302. doi:10.1016/j.jaging.2005.11.001

Trudeau, D. (2018). Tracing new urbanism's suburban intervention in Minneapolis-St Paul. *Journal of Planning Education and Research, 38*(2), 25-38. doi:10.1177/0739456X16671996

Tunstall, H., Pearce, J., Shortt, N., & Mitchell, R. (2014). Residential mobility and the association between physical environment disadvantage and general and mental health. *Journal of Public Health, 34*(2), 563-572. doi:10.1093/pubmed/fdu058

United Nations. (2002). United Nations Report of the Second World Assembly on Ageing Madrid.

van Abbema, R., Bielderman, A., De Greef, M., Hobbelen, H., Krijnen, W., & Schans, C. (2015). Building from a conceptual model of the resilience process during ageing: Towards the Groningen Aging Resilience Inventory. *Journal of Advanced Nursing, 71*(9), 2208-2219. doi:10.1111/jan.12685

Van Cauwenberg, J., De Bourdeaudhuij, I., De Meester, F., Van Dyck, D., Salmon, J., Clarys, P., & Deforche, B. (2011). Relationship between the physical environment and physical activity in older adults: A systematic review. *Health & Place, 17*, 458-469. doi:10.1016/j.healthplace.2010.11.010

Van Cauwenberg, J., Van Holle, V., De Bourdeaudhuij, I., Van Dyck, D., & Deforche, B. (2016). Neighborhood walkability and health outcomes among older adults: The mediating role of physical activity. *Health & Place, 37*, 16-25. doi:10.1016/j.healthplace.2015.11.003

Van Cauwenberg, J., Van Holle, V., Simons, D., Deridder, R., Clarys, P., Goubert, L., . . . Deforche, B. (2012). Environmental factors influencing older adults' walking for transportation: A study using walk-along interviews. *International Journal of Behavioral Nutrition and Physical Activity, 9*, 85-96. doi:10.1186/1479-5868-9-85

van Hees, S., Horstman, K., Jansen, M., & Ruwaard, D. (2015). Conflicting notions of citizenship in old age: An analysis of an activation practice. *Journal of Aging Studies, 35*, 178-189. doi:10.1016/j.jaging.2015.09.001

Van Holle, V., Van Cauwenberg, J., De Bourdeaudhuij, I., Deforche, B., Van de Weghe, N., & Van Dyck, D. (2016). Interactions between neighborhood social environment and walkability to explain Belgian older adults' physical activity and sedentary time. *International Journal of Environmental Research and Public Health, 13*(6), 1-14. doi:10.3390/ijerph13060569

Van Holle, V., Van Cauwenberg, J., Van Dyck, D., Deforche, B., Van de Weghe, N., & De Bourdeaudhuij, I. (2014). Relationship between neighborhood walkability and older adults' physical activity: results from the Belgian Environmental Physical Activity Study in Seniors (BEPAS Seniors).

International Journal of Behavioral Nutrition and Physical Activity, 11(1), 1-9. doi:10.1186/s12966-014-0110-3

van Manen, M. (1990). *Researching lived experience: Human science for an action sensitive pedagogy*. Albany, NY: University of New York Press.

van Manen, M. (2001). *Researching lived experience: Human science for an action sensitive pedagogy* (2nd ed.). London, United Kingdom: The Althouse Press.

Van Manen, M. (2002). *Writing in the dark: Phenomenological studies in interpretive inquiry*. Ontario, Canada: The Althouse Press.

van Manen, M. (2014). *Phenomenology of practice: Meaning-giving methods in phenomenolgical research and writing*. Walnut Creek, CA: Left Coast Press Inc.

van Manen, M. (2017). Phenomenology in its original sense. *Qualitative Health Research, 27*(6), 810-825. doi:10.1177/1049732317699381

van Manen, M., Higgins, I., & Riet, P. (2016). A conversation with Max van Manen on phenomenology in its original sense. *Nursing & Health Sciences, 18*(1), 4-7. doi:10.1111/nhs.12274

Villanueva, K., Knuiman, M., Nathan, A., Giles-Corti, B., Christian, H., Foster, S., & Bull, F. (2014). The impact of neighborhood walkability on walking: Does it differ across adult life stage and does neighborhood buffer size matter? *Health & Place, 25*, 43-46. doi:10.1016/j.healthplace.2013.10.005

Villar, F. (2012). Successful ageing and development: The contribution of generativity in older age. *Ageing and Society, 32*(7), 1087-1105. doi:10.1017/S0144686X11000973

Wahl, H., & Oswald, F. (2010). Environmental perspectives on ageing In D. Dannefer & C. Phillipson (Eds.), *SAGE book of gerontology* (pp. 111-124). London, United Kingdom: Sage.

Walker, R., & Hiller, J. (2007). Places and health: A qualitative study to explore how older women living alone perceive the social and physical dimensions of their

neighbourhoods. *Social Science and Medicine, 65*(6), 1154-1165. doi:10.1016/j.socscimed.2007.04.031

Walsh, D., McCartney, G., McCullough, S., van der Pol, M., Buchanan, D., & Jones, R. (2015). Comparing levels of social capital in three northern post-industrial UK cities. *Public Health, 129*(6), 629-638. doi:10.1016/j.puhe.2015.02.024

Walsh, K., O'Shea, E., Scharf, T., & Murray, M. (2012). Ageing in changing community contexts: Cross-border perspectives from rural Ireland and Northern Ireland. *Journal of Rural Studies, 28*(4), 347-357. doi:10.1016/j.jrurstud.2012.01.012

Walsh, K., O'Shea, E., Scharf, T., & Shucksmith, M. (2014). Exploring the impact of informal practices on social exclusion and age-friendliness for older people in rural communities. *Journal of Community & Applied Social Psychology, 24*, 37-49. doi:10.1002/casp.2176

Walsh, K., Scharf, T., & Keating, N. (2017). Social exclusion of older persons: A scoping review and conceptual framework. *European Journal of Ageing, 14*, 81-98. doi:10.1007/s10433-016-0398-8

Ward Thompson, C. (2013). Activity, exercise and the planning and design of outdoor spaces. *Journal of Environmental Psychology, 34*, 79-96. doi:10.1016/j.jenvp.2013.01.003

Wertz, F., Charmaz, K., McMullen, L., Josselson, R., Anderson, R., & McSpadden, E. (2011). *Five Ways of doing qualitative analysis: Phenomenological psychology, grounded theory, discourse analysis, narrative research, and intuitive inquiry*. Retrieved from http://ebookcentral.proquest.com/lib/aut/detail.action?docID=674984

White, D., Jette, A., Felson, D., Lavalley, M., Lewis, C., Torner, J., . . . Keysor, J. (2010). Are features of the neighborhood environment associated with disability in older adults? *Journal of Disability and Rehabilitation, 32*(8), 639-645. doi:10.3109/09638280903254547

Wiles, J., Allen, R., Palmer, A., Hayman, K., Keeling, S., & Kerse, N. (2009). Older people and their social spaces: a study of well-being and attachment to place in Aotearoa New Zealand. *Social Science and Medicine, 68*(4), 664-671. doi:10.1016/j.socscimed.2008.11.030

Wiles, J., & Jayasinha, R. (2013). Care for place: The contributions older people make to their communities. *Journal of Aging Studies, 27*(2), 93-101. doi:10.1016/j.jaging.2012.12.001

Wiles, J., Leibing, A., Guberman, N., Reeve, J., & Allen, R. (2012). The meaning of "aging in place" to older people. *Gerontologist, 52*(3), 357-366. doi:10.1093/geront/gnr098

Wiles, J., Rolleston, A., Pillai, A., Broad, J., Teh, R., Gott, M., & Kerse, N. (2017). Attachment to place in advanced age: A study of the LiLACS NZ cohort. *Social Science and Medicine, 185*, 27-37. doi:10.1016/j.socscimed.2017.05.006

Wilkinson, D. (2007). The multidimensional nature of social cohesion: Psychological sense of community, attraction, and neighboring. *American Journal of Community Psychology, 40*(3-4), 214-229. doi:10.1007/s10464-007-9140-1

Wilson, D., Nam, M., Murphy, J., Victorino, J., Gondim, E., & Low, G. (2017). A critical review of published research literature reviews on nursing and healthcare ageism. *Journal of Clinical Nursing, 26*(23-24), 3881-3892. doi:10.1111/jocn.13803

Wollan, G. (2003). Heidegger's philsophy of space and place. *Norsk Geografisk Tidsskeift-Norwegian Journal of Geography, 57*, 31-39.

World Health Organization. (2002a). *Active ageing: A policy framework*: World Health Organization. Retrieved from https://www.who.int/ageing/publications/active_ageing/en/

World Health Organization. (2002b). *Toward a common langauge for functioning, disaibility and health: The international classification of functioning,*

disability and health [ICF]. Retrieved from
http://www.who.int/classifications/icf/en/

World Health Organization. (2007a). *Checklist of essential features of age-friendly cities*. Retrieved from
http://www.who.int/ageing/publications/Age_friendly_cities_checklist.pdf

World Health Organization. (2007b). *Global age-friendly cities: A guide*. Retrieved from https://www.who.int/ageing/age_friendly_cities_guide/en/

World Health Organization. (2015a). *Measuring the age-friendliness of cities: A guide to using core indicators*: World Health Organization. Retrieved from http://apps.who.int/iris/handle/10665/203830

World Health Organization. (2015b). *World report on ageing and health*: World Health Organization. Retrieved from https://www.who.int/ageing/publications/world-report-2015/en/

World Health Organization. (2018). *Age-friendly world*. Retrieved from http://www.agefriendlyworld.com

Wrathall, M. (2005). *How to read Heidegger*. London, UK: Granta Publications.

Wright-St Clair, V. (2012). Being occupied with what matters in advanced age. *Journal of Occupational Science, 19*(1), 44-53. doi:10.1080/14427591.2011.639135

Wright-St Clair, V. (2015). Doing (interpretive) phenomenology. In S. Nayar & M. Stanley (Eds.), *Qualitative research methodologies for occupational science and therapy* (pp. 53-69). Abingdon, United Kingdom: Routledge.

Wright-St Clair, V., Grant, B., & Smythe, E. (2014). Narratives in research: Story as 'showing' the eminently ordinary experience of ageing. *Australasian Journal of Ageing, 33*(2), 132-135. doi:10.1111/ajag.12132

Wright-St Clair, V., Kerse, N., & Smythe, E. (2011). Doing everyday occupations both conceals and reveals the phenomenon of being aged. *Australian Occupational Therapy Journal, 58*, 88-94.

Yang, H.-Y., & Sanford, J. (2012). Home and community environmental features, activity performance, and community participation among older adults with functional limitations. *Journal of Ageing Research, 2012*, 1-14. doi:10.1155/2012/625758

Yen, I. H., Shim, J. K., Martinez, A. D., & Barker, J. C. (2012). Older people and social connectedness: How place and activities keep people engaged. *Journal of Ageing Research, 2012*, 1-10. doi:10.1155/2012/139523

Zambas, S. (2016). Data Analysis within an Interpretive Inquiry: Meaning as Consequence. In *SAGE research methods cases*. Retrieved from http://methods.sagepub.com/case/data-analysis-within-an-interpretive-inquiry-meaning-as-consequence. doi:10.4135/9781446273050155595400

Zaninotto, P., Breeze, E., McMunn, A., & Nazroo, J. (2013). Socially productive activities, reciprocity and well-being in early old age: Gender-specific results from the english longitudinal study of ageing (ELSA). *Journal of Population Ageing, 6*(1), 47-57. doi:10.1007/s12062-012-9079-3

Zeitler, E., & Buys, L. (2015). Mobility and out-of-home activities of older people living in suburban environments: 'Because I'm a driver, I don't have a problem'. *Ageing & Society, 35*(4), 785-808. doi:10.1017/S0144686X13001086

Ziarek, K. (2013). A vulnerable world: Heidegger on humans and finitude. *SubStace, 42*(132), 169-184.

Ziegler, F. (2012). "You have to engage with life, or life will go away": An intersectional life course analysis of older women's social participation in a disadvantaged urban area. *Geoforum, 43*(6), 1296-1305. doi:10.1016/j.geoforum.2012.03.013

Ziegler, F., & Schwanen, T. (2011). 'I like to go out to be energised by different people': An exploratory analysis of mobility and wellbeing in later life. . *Ageing and Society, 31* (5), 758–781.

Appendices

Appendix A: AUTEC Approval

6 May 2016

Stephen Neville

Faculty of Health and Environmental Sciences

Dear Stephen

Ethics Application: **16/117 The experience of older adults' everyday participation in their urban neighbourhood.**

Thank you for submitting your application for ethical review. I am pleased to confirm that the Auckland University of Technology Ethics Committee (AUTEC) has approved your ethics application for three years until 2 May 2019..

As part of the ethics approval process, you are required to submit the following to AUTEC:

- A brief annual progress report using form EA2, which is available online through http://www.aut.ac.nz/researchethics. When necessary this form may also be used to request an extension of the approval at least one month prior to its expiry on 2 May 2019;
- A brief report on the status of the project using form EA3, which is available online through http://www.aut.ac.nz/researchethics. This report is to be submitted either when the approval expires on 2 May 2019 or on completion of the project;

It is a condition of approval that AUTEC is notified of any adverse events or if the research does not commence. AUTEC approval needs to be sought for any alteration to the research, including any alteration of or addition to any documents that are provided to participants. You are responsible for ensuring that research undertaken under this approval occurs within the parameters outlined in the approved application.

AUTEC grants ethical approval only. If you require management approval from an institution or organisation for your research, then you will need to obtain this. If your research is undertaken within a jurisdiction outside New Zealand, you will need

to make the arrangements necessary to meet the legal and ethical requirements that apply there.

To enable us to provide you with efficient service, we ask that you use the application number and study title in all correspondence with us. If you have any enquiries about this application, or anything else, please do contact us at ethics@aut.ac.nz.

All the very best with your research,

Kate O'Connor
Executive Secretary
Auckland University of Technology Ethics Committee

Cc: Jo Conaglen;Valerie Wright-St Clair

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People (85 years +) neighbourhood project
Phone: 9219999 extension 7017

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Appendix C: Participant Information Sheet

Date Information Sheet Produced: 24 March 2016

Project Title

The experience of older adults' everyday participation in their urban neighbourhood

Hello, I am Jo Conaglen, a Registered Nurse with more than thirty years' nursing experience, much of it working with older people. I am currently an AUT student conducting research as part of my doctoral studies. My study is exploring the everyday experiences of older people within their neighbourhood. I hope the findings of this study will contribute to Auckland's neighbourhood design and development in a way that older people are supported to continue to participate for as long as possible.

If you are

- 85 years or older
- Able to get out into your neighbourhood-community at least two days of the week

I can come to you in your home or, a place of your choice somewhere in your community. I will be recording our interview and therefore we will need a quiet environment.

Your participation is voluntary and you can withdraw at any time prior to the completion of data collection on December 2016. Your confidentiality is guaranteed. You are welcome to have family or friend present if you wish.

What is the purpose of this research?

The purpose of this research is to develop a greater understanding of older adults' experience as they engage in everyday life in their neighbourhood and have this contribute to age-friendly urban design appropriate for New Zealand. The study is

part of a research project toward a doctoral qualification. The findings may be used for academic publication or presentation.

How was I identified and why am I being invited to participate in this research?

You will have responded to an advertisement indicating your interest in participating the study. You are invited to participate because you are 85 years or older, you live in an Auckland urban neighbourhood and you get out into your neighbourhood at least two days a week. People who live in a residential facility or who are not able to recount recent events in English will not be included in this study.

What will happen in this research?

This study will involve a one hour interview with me and will be conducted in your home.

What are the discomforts and risks?

The only possible discomfort I anticipate is that you may find an hour long conversation becomes tiring.

How will these discomforts and risks be alleviated?

If you indicate you are tired or appear to be tiring we will end the conversation. If you indicate you are interested in continuing the conversation at a later date this can be arranged.

What are the benefits?

The benefits of sharing your experiences is that it will contribute to a greater understanding of what neighbourhood design features could help older people stay engaged in their communities to their greatest advantage. In addition your experiences contribute to my research toward a doctoral qualification.

How will my privacy be protected?

The information you share will remain confidential to the researcher and her supervisors.

What are the costs of participating in this research?

There is no financial cost to you. This study will involve about 90 minutes of your time; a one hour interview and 30 minutes at a later date to read the stories from this interview What opportunity do I have to consider this invitation?

You will have one week to consider this invitation at which time I will follow-up with a phone call.

How do I agree to participate in this research?

Prior to participating in this study you will be asked to complete a Consent Form that I will bring to our first meeting. Consent to participate is on the basis that you have fully understood the purpose of the study, participant expectations of a one-hour interview and that your privacy will be protected.

Will I receive feedback on the results of this research?

You will receive a copy of the research summary to be presented to Auckland Council

What do I do if I have concerns about this research?

Any concerns regarding the nature of this project should be notified in the first instance to the Project Supervisor, Dr Stephen Neville: sneville@aut.ac.nz , 9219999 ext 9379

Concerns regarding the conduct of the research should be notified to the Executive Secretary of AUTEC, Kate O'Connor, *ethics@aut.ac.nz* , 921 9999 ext 6038.

Whom do I contact for further information about this research?

Please keep this Information Sheet and a copy of the Consent Form for your future reference. You are also able to contact the research team as follows:

Researcher Contact Details: Jo Conaglen; jo.conaglen@aut.ac.nz **9219999 ext 7017**

Project Supervisor Contact Details: Dr Stephen Neville: sneville@aut.ac.nz ,
9219999 ext 9379

**Approved by the Auckland University of Technology Ethics Committee on *6 May
2016*, AUTEC Reference number 16/117**

Appendix D: Consent Form

Participant Consent

Project title: **The experience of older adults' everyday participation in their urban neighbourhood**

Project Supervisor: **Dr Stephen Neville**

Researcher: **Jo Conaglen**

○ I have read and understood the information provided about this research project in the Information Sheet dated _____.

○ I have had an opportunity to ask questions and to have them answered.

○ I understand that notes will be taken during the interviews and that they will also be audio-taped and transcribed.

○ I understand that I may withdraw myself or any information that I have provided for this project at any time prior to completion of data collection, without being disadvantaged in any way.

○ If I withdraw, I understand that all relevant information including tapes and transcripts, or parts thereof, will be destroyed.

○ I agree to take part in this research.

○ I wish to receive a copy of the report from the research (please tick one): Yes○ No○

Participant's signature:

....……………………………………………………

Participant's name:

....……………………………………………………

Participant's Contact Details (if appropriate):

……………………………………………………………………………………..

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Date:

Approved by the Auckland University of Technology Ethics Committee on 6 May 2016, **Reference number 16/117**

Note: The Participant should retain a copy of this form.

Appendix E: Transcriber Confidentiality Form

Project title: *The experience of older adults' participation in their urban neighbourhood*

Project Supervisor: **Dr Stephen Neville**

Researcher: **Jo Conaglen**

○ I understand that all the material I will be asked to transcribe is confidential.

○ I understand that the contents of the tapes or recordings can only be discussed with the researchers.

○ I will not keep any copies of the transcripts nor allow third parties access to them.

Transcriber's signature:

....…………………………………………………

Transcriber's name:

Date:

Project Supervisor's Contact Details:

Dr Stephen Neville

sneville@aut.ac.nz

ph 9219999 ext 9379 / 021995689

Approved by the Auckland University of Technology Ethics Committee on 6 May 2016, Reference number 16/117

Note: The Transcriber should retain a copy of this form.

Date Produced: 4 April 2016

Project Title

The experience of older adults' everyday participation in their urban neighbourhood

As a phenomenological study best elicits rich stories through conversation the interview is conducted more as a conversation using semi-structured guideline of topics/questions, while retaining a clear sense of what the 'something' that the interview is about. The semi-structured approach also allows freedom to explore ideas that emerge within and across interviews

Questions about 'a moment' hold the potential to throw new light on the phenomenon. Examples of questions:

"Tell me about the last time you went out into your neighbourhood" and to encourage the stories to continue by asking "then what happened"?

"Tell me about a time when you enjoyed being in your neighbourhood" / " did not enjoy..."– probing further for what made it enjoyable/ or not; are you going out less?

"tell me about the last time you took part in a neighbourhood activity" – getting there/coming home

Tell me about a time you went.. shopping; to a show (gallery, movies, theatre)…; used the… library/ supermarket/ park / bus

- Tell me about getting there…in…then…
- Tell me about coming home…then

Scope exists for eliciting participants' interpretation of things of why things within the conversation e.g. "what do you think this means for being an older person in the neighbourhood?"

"Tell me what makes it difficult for you to get out into your neighbourhood?" or "discourages you from getting out and about?" and "are you going out less?" and if so what do you think contributes to this?

"Tell me of neighbourhoods other than your own that you visit?" – probing further for what takes you to these neighbourhoods and what makes for an enjoyable/unenjoyable experience

"What would you miss if it was no longer there/available to you in the neighbourhood?"